

# **AFRICA AND THE MIDDLE EAST**



# Angola

## I. Summary

Although some cannabis is cultivated and consumed locally, Angola neither produces nor consumes significant quantities of drugs. Angola continues to be a transit point for drug trafficking, particularly cocaine brought in from Brazil or South Africa and destined for Europe. Angola is a party to the 1988 UN Drug Convention.

## II. Status of Country

Angola is not a major center of drug production, money laundering, or production of precursor chemicals, and is not likely to become one. It is however, a transit point for drug trafficking. Narcotics, mostly cocaine, enter from Brazil and are then transported to Europe and South Africa. Police continued to seize cocaine and cannabis in 2007. Increased intelligence sharing with the U.S. and the scanning of incoming containers improved the effectiveness of drug interdiction.

## III. Country Actions Against Drugs in 2007

**Policy Initiatives.** The National and Border Police's drug seizure efforts have continued, but reliable seizure statistics are not available. Angola cooperates with South Africa, Brazil, and Portugal in fighting the flow of cocaine through Angola to various destinations. South Africa has provided intelligence, training, and equipment to the Angolan police. Angola also cooperates on a regional basis via the South Africa Development Community (SADC).

**Corruption.** As a matter of government policy, Angola does not encourage illicit production or distribution of drugs or associated money laundering. Although cases of public corruption connected to narcotics trafficking are rare, in June 2005, three officials of the National Department for Criminal Investigation were charged with trafficking in cocaine.

**Agreement and Treaties.** Angola is a party to the 1988 UN Drug Convention, the 1971 UN Convention Against Psychotropic Substances, and the 1961 UN Single Convention as amended by the 1972 Protocol. Angola ratified the UN Corruption Convention on August 29, 2006 and has signed, but has not yet ratified the UN Convention against Transnational Organized Crime. The U.S. does not have an extradition or mutual legal assistance treaty with Angola. Angola has a constitutional bar against extraditing or expelling its nationals. Its constitution also prohibits extradition for death penalty cases.

**Domestic Programs/Demand Reduction.** In 2004, Angola enacted legislation mandating treatment for those convicted of narcotics abuse. Drug rehabilitation centers have been established in Luanda, Lubango, and Benguela, but resources limit what the government can offer in modern drug treatment.

## IV. U.S. Policy Initiatives and Programs

**Bilateral Cooperation.** In 2007, 35 Angolan police officers participated in State Department-sponsored regional training courses, which included segments on counternarcotics.

**The Road Ahead.** The U.S. will continue to assist Angola through training of law enforcement officials at ILEA Gaborone and in ILEA Roswell.

# Benin

## I. Summary

Benin remains a low volume producer of cannabis, and continues to be a transit point for other illegal narcotics. During 2007, no new counternarcotics laws or initiatives were introduced in Benin. Benin's drug enforcement police unit, the Office Centrale de Repression du Traffic Illicite de la Drogue, OCERTID (Central Office for Repression of Illicit Drug Trafficking) has limited resources. The rate of illegal drug seizures in Benin was low during 2007, as were quantities seized. Benin is a party to the 1988 UN Drug Convention (UNDC).

## II. Status of Country

Benin is a small-scale producer of illegal narcotics. Marijuana is the only significant drug produced, and there is virtually no production of chemical drugs such as methamphetamines. Marijuana is sparsely cultivated in the central area and regions of Benin, along its western and eastern borders with Nigeria and Togo. The primary market for this cultivation is within Benin. During 2007, there were no new efforts by the Government of Benin (GOB) to eradicate the drug production in these areas. Benin's porous borders and lack of port security allow for the easy transshipment of narcotics by regional traffickers. All forms of narcotics are known to transit through Benin.

## III. Country Action Against Drugs in 2007

In 2007, there have been few efforts toward combating the trafficking of illegal narcotics as laid out by the 1988 Drug Convention, by the current Benin administration. Legislation adopted in 1997 (which increased sentences for traffickers, criminalized drug-related money laundering, and permitted the seizure of drug-related assets), remains in effect with limited implementation. Benin has no legal mechanism in place to seize assets on behalf of counternarcotic efforts and there is no U.S. extradition agreement with Benin. However, the U.S. and Benin entered into several bilateral counternarcotics agreements in 1995 and 2001, which provided for U.S. assistance to Benin's efforts. In 2006, Benin signed a bilateral agreement with Nigeria under which the two countries implemented joint border control teams and procedures for trans-border crimes including narcotics trafficking. To date, no known senior Beninese Government official or entity engages in, encourages, or facilitates the illicit production or distribution of narcotic or psychotropic drugs. Benin did not participate in any major regional anti-narcotic efforts during 2007.

OCERTID has had a team assigned to the port of Cotonou since November 2005, but this team continues to be hampered by a lack of training in the area of seaport security and container search procedures. The U.S.-administered Millennium Challenge Compact Grant will help address these weaknesses over the next four years. The Compact includes the development and implementation of a port master plan that incorporates institutional security improvements in the areas of access, customs services, and cargo screening.

There is no legislation or legal framework in Benin to prevent or punish narcotics-related corruption. In 2007, Benin has made attempts to punish officials involved in illegal activity. The current administration takes a particularly tough stance against corruption. The Benin judiciary initiated proceedings against a high ranking police official in February 2007 and put him in pre-

trial detention at the prison of Cotonou on narcotic-related charges. When a capsized boat with drugs washed up on a beach near Cotonou in August 2007, five other high-ranking police officials were also put in pre-trial detention at the prison of Ouidah, on allegations of withholding seized cocaine and trafficking cocaine. This seizure turned out to be the largest cocaine seizure in Benin's history.

The total reported drug seizures in Benin, to date, during 2007 were: cannabis: 56.4 kg, cocaine: 420.4 grams, and heroin: 1.3 kg. There were a total of 100 people arrested and prosecuted. The breakdown of nationality is: 74 Beninese, 17 Nigerians, 3 Togolese, 3 Ghanaians, 2 Nigerians, and 1 Dutch. Law enforcement resources continue to target small-scale couriers, users, and criminals involved in other forms of crime who are generally captured with various quantities of illegal drugs in their possession.

Benin's Drug Enforcement Coordination Office, the Interdepartmental Committee to Fight Against Drugs and Narcotics Abuse (CILAS), includes representatives from the Ministries of Health, Family, Social Protection, Finance, Economy, Environment, and Youth. CILAS is responsible for implementing Benin's domestic drug policy, but no results on the effectiveness of its programs are available. The most recent chair of CILAS was the former National Director of Police, and was recently relieved of his CILAS duties due to a drug corruption scandal. CILAS is now without a chairperson.

**Agreements and Treaties.** Benin is a party to the 1988 UN Drug Convention, the 1961 UN Single Convention as amended by the 1972 Protocol, and the 1971 UN Convention on Psychotropic Substances. Benin is a party to the UN Convention against Corruption, and to the UN Convention against Transnational Crime and its protocols against trafficking in persons, migrant smuggling and illegal manufacturing and trafficking in firearms.

#### IV. U.S. Policy Initiatives and Programs

**Bilateral Cooperation.** With the strong anti-corruption stance by the Beninese presidential administration, hopefully the aggressive implementation of prior counternarcotics initiatives and new counternarcotics initiatives will be brought back to the foreground. Efforts by the U.S. Government towards improving port and border security, such as the Millennium Challenge Grant should greatly assist these efforts.

**The Road Ahead.** The lack of training and resources for counternarcotics units remain a problem for Benin, which will limit results until a sustained effort is made to remedy this problem.

# Egypt

## I. Summary

The Arab Republic of Egypt is not a major producer, supplier, or consumer of narcotics or precursor chemicals. Heroin and cannabis are transported through Egypt, but presumed levels have not risen in four years. The Anti-Narcotics General Administration (ANGA) is the main counternarcotics organization in Egypt. It is competent and progressive, and cooperates fully with the Drug Enforcement Administration (DEA) office in Cairo. In 2004, a joint DEA-ANGA investigation uncovered a significant MDMA (Ecstasy) laboratory in Alexandria, resulting in the arrest of four individuals, indictment of three U.S. citizens, and a secondary ongoing investigation that identified more than two million dollars of drug related proceeds. In 2006, the DEA Country Office initiated several long term investigations working with ANGA; these continued into 2007. The DEA Country Office has had numerous other bi-lateral drug investigation successes in Egypt in 2007. Egypt is a party to the 1988 UN Drug Convention.

## II. Status of Country

Egypt is not a significant producer or consumer of narcotics or precursor chemicals, despite the fact that opium poppy and cannabis plants are grown in Egypt. The substances that are most commonly abused are cannabis derivatives, which are commonly known in Egypt as “bango,” and legitimate pharmaceuticals. Narcotics do pass through Egypt. Egypt’s long and mostly uninhabited borders, combined with the high level of shipping passing through the Suez Canal Zone, have made Egypt prone to the transshipment of Afghan heroin. Other types of narcotics periodically pass through Cairo International Airport. The narcotics are primarily destined for Western Europe, with only small amounts headed to the United States. Trafficking has diminished considerably in recent years due to the elevation of security in Egypt and the region as a whole.

The ANGA is the oldest counternarcotics unit in the Arab world. It has jurisdiction over all criminal matters pertaining to narcotics and maintains offices in all major Egyptian cities and ports of entry. Despite limited resources, ANGA has continually demonstrated improvements in its capabilities.

## III. Country Action Against Drugs in 2007

**Policy Initiatives.** The Government of Egypt (GOE) continues to aggressively pursue a comprehensive drug control strategy that was developed in 1998. ANGA, as the primary Egyptian drug enforcement agency, coordinates with the Egyptian Ministry of Interior, the Coast Guard, the Customs Service, and select military units on all aspects of drug law enforcement. Government and private sector demand reduction efforts exist, but are hampered by financial constraints and logistical challenges.

**Accomplishments/Law Enforcement Efforts.** Internal security and combating terrorism are the major foci of Egyptian law enforcement efforts. Despite these priorities, ANGA is able to operate an effective program against narcotics trafficking. Egypt is a transit country for narcotics. ANGA investigates and targets significant drug traffickers, intercepts narcotics shipments, and detects and eradicates illegal crops. Large-scale seizures and arrests are rare, primarily because Egypt does not have a significant narcotics market or narcotics abuse culture. ANGA operates its own drug

awareness campaign in addition to other government and private sector demand reduction programs. ANGA's Eradication Unit conducts monthly operations against cannabis and opium crops in the Sinai. Reversing a trend over the past several years, the amount of narcotics seized during 2006 was lower than that of the previous year.

According to the GOE, drug seizures in 2006 (Latest available figures.) included cannabis (101.0 metric tons), hashish (3.2 metric tons), and smaller amounts of heroin, opium, psychotropic drugs, and cocaine. Significant amounts of prescription and "designer" drugs such as Ecstasy, amphetamines, and codeine were also seized. During the course of 2006, Egyptian law enforcement officials eradicated 520 hectares of cannabis and 98 hectares of opium poppy plants.

The above hashish seizures have significantly increased in 2007 due in large part to three separate hashish seizures in the northern Egyptian Desert. These seizures were the result of intelligence sharing by the DEA Country Office on hashish being smuggled from Morocco.

With the passage of the first anti-money laundering law in 2002, which criminalized the laundering of proceeds derived from trafficking in narcotics and numerous other crimes, seizures of currency in drug-related cases have increased significantly over the past several years.

**Corruption.** As a matter of government policy, the Government of Egypt does not encourage or facilitate illicit production or distribution of narcotic or psychotropic drugs or other controlled substances, or the laundering of proceeds from illegal transactions. The GOE has strict laws and harsh penalties for government officials convicted of involvement in narcotics trafficking or related activities. A limited number of local low-level police officials who were involved in narcotics-related activity or corruption have been identified and arrested.

**Agreements and Treaties.** Egypt is a party to the 1988 UN Drug Convention, the 1971 UN Convention on Psychotropic Substances, and the 1961 UN Single Convention as amended by the 1972 Protocol. Egypt is a party to the UN Convention against Transnational Organized Crime and its protocols on migrant smuggling and trafficking in persons and the UN Corruption Convention. Egypt and the United States cooperate in law enforcement matters under an 1998 MLAT and an 1874 extradition treaty. The 1988 UN Drug Convention, coupled with the 1874 extradition agreement with the former Ottoman Empire, provides the United States and Egypt with a basis to seek extradition of narcotics traffickers.

**Cultivation and Production.** Cannabis is grown year round in the northern and southern Sinai and in Upper Egypt, while opium poppy is grown in the southern Sinai only from November through March. Rugged terrain means that plots of illegal crops are small and irregularly shaped. ANGA combats this production by using aerial observation and confidential informants to identify illegal plots. Once the crops are located, ANGA conducts daylight eradication operations that consist of cutting and burning the plants. ANGA has yet to implement a planned herbicide eradication program. No heroin processing laboratories have been discovered in Egypt in the last 15 years and no evidence is available indicating that opiates or cannabis grown in Egypt reach the United States in sufficient quantities to have a significant impact. In an ongoing investigation that started in 2004, a joint DEA-ANGA operation uncovered the first ever MDMA Ecstasy laboratory in Egypt and eliminated it before it reached significant production.

**Domestic Programs (Demand Reduction).** In 2006, the National Council for Combating and Treating Addiction continued to be the GOE's focal point for domestic demand reduction programs. The Council is an inter-ministerial group chaired by the Prime Minister and has the participation of ten ministries. The group espouses a three-pronged strategy to counter the demand



for narcotics: awareness, treatment (including detoxification and social/psychological treatment), and rehabilitation. The group's efforts over the past years have included a range of activities, for example, a media advertising campaign with participation from First Lady Suzanne Mubarak in 2005, annual seminars at Al-Azhar University on "Islam and Narcotics," and the establishment of a drug treatment hotline and website. Additionally, the Council sponsors four rehabilitation centers, primarily focused on the Cairo metropolitan area. These centers annually receive thousands of requests from addicts for help.

#### **IV. U.S. Policy Initiatives and Programs**

**Policy Initiatives/Bilateral Cooperation.** The U.S. counternarcotics policy is to engage the GOE in a bilateral program to reduce narcotics transshipments and decrease opium poppy and cannabis cultivation. The policy includes the following specific objectives: increase training to ANGA and other government offices responsible for narcotics enforcement; assist with the identification of illegal crop eradication targets; improve narcotics interdiction methodology; and improve intelligence collection and analysis. In 2005, the DEA country office initiated Operation Sphinx, a joint DEA-ANGA operation to collect actionable intelligence for enforcement/interdiction action in the Suez Canal and the Gulf of Aqaba. The operation targets sources of information in the maritime industry throughout the region. In 2007 the U.S. Coast Guard hosted two Egyptian students for maritime law enforcement and seaport counterterrorism training. The Department of Homeland Security, through U.S. Customs and Border Protection, has engaged the GOE in customs capacity building efforts with training focused on airport and land border enforcement techniques.

**The Road Ahead.** In fiscal year 2008, the U.S. plans to increase its joint operations with ANGA, moving beyond a previously predominant focus on monitoring the narcotics problem. This will involve the DEA country office continuing to work closely with ANGA on joint investigations, as well as improving interdiction and eradication techniques and developing additional sources of information on trafficking and production.

# Ethiopia

## I. Summary

Ethiopia does not play a major role in the production, trafficking or consumption of illicit narcotics or precursor chemicals associated with the drug trade. However, Ethiopia is strategically located along a major narcotics transit route between the UAE and West African heroin markets, and the amount of drugs transiting via Ethiopia is increasing. Heroin transits Ethiopia for markets in West Africa, Europe and the United States, primarily due to Ethiopia's good airline connections between those markets and Southwest/Southeast Asia. Nigerian and Ghanaian traffickers use Ethiopia as a transit point on an increasing but limited basis. Although cannabis is grown throughout Ethiopia, it is mostly consumed in rural areas of the country. Khat, a chewable leaf with a mild narcotic effect, is legal in Ethiopia. Ethiopia now produces more khat than coffee for export. Seizures are up, and illegal exports from Ethiopia, through Europe to the U.S., are rising. The Illicit Drug Control Service (IDCS), formerly the Ethiopian Counter-narcotics Unit (ECNU), has a small staff, limited training and equipment, and would like to partner with the international community to improve its capabilities. The IDCS maintains an interdiction team at the international airport in the capital. Ethiopia is a party to the 1988 UN Drug Convention.

## II. Status of Country

Ethiopia is not a significant producer, trafficker or consumer of narcotic drugs or diverted precursor chemicals. It is however becoming a more significant site for heroin and cannabis transiting. Cannabis is produced in rural areas throughout Ethiopia. Only a small portion of cannabis is being produced for export, primarily to neighboring countries. The majority of locally produced cannabis is consumed at home, but absolute quantities in both cases are moderate. According to the IDCS, cannabis is primarily grown and used by the Rastafarian population. The highest volume has been grown in and outside of the town of Shashemene, approximately 250 kilometers south of Addis Ababa. Information from late-2007 suggests that traffickers in and around Shashemene have begun using machines to process raw cannabis into a paste to smuggle abroad. IDCS also believes that cannabis is often sold concurrently with khat. No seizures of opium have been reported since 2001, when opium poppy was seized at two locations where it was apparently being grown as an experimental crop.

## III. Country Action Against Drugs in 2007

The use of heroin and other hard drugs remains low, due primarily to the limited availability of such drugs, their high street prices, and low incomes of most Ethiopians. To the extent that such hard drugs are available is in large part due to the spillover effect from drug couriers transiting through Bole International Airport in Addis Ababa. Bole is a major air hub for flight connections between Southeast and Southwest Asia and Africa, and according to Ethiopian authorities, much of the heroin entering and/or transiting Ethiopia comes from Asia, although absolute quantities in both cases are fairly low. Some of the flights require up to a two-day layover in Addis Ababa, permitting a limited opportunity for the introduction of these drugs into the local market. Since the March 2007 arrest of a Ghanaian national who had ingested nearly one kilogram of heroin after traveling from Iran, Ethiopian federal authorities have arrested 4 other Africans transiting Addis Ababa from Dubai with ingested heroin. The suspected smugglers claimed to have purchased the heroin pellets

in Iran and Dubai. Authorities now randomly search West Africans flying from “high risk” points of origin.

**Law Enforcement Efforts.** The IDCS has a small staff and inadequate budget, limiting its capabilities. There is currently no training offered for officers in IDCS, and IDCS has no permanent programs. After changing its leadership in 2002, IDCS has been more proactive at the federal level, but is still hampered by financial constraints. IDCS is comprised of approximately 40 individuals, including federal police officers and administrative personnel. . Its efforts include an airport interdiction team comprised of 11 staff, a four-person surveillance team, and an educational unit with six staffers. . At the airport, the interdiction team uses four drug sniffer German shepherd dogs to examine, with a degree of randomness, cargo and luggage. Sniffer dogs are primarily trained and used to detect cocaine, cannabis, and heroin. The IDCS routinely screens passengers, luggage and cargo on flights arriving from “high risk” origins, such as Dubai, Bangkok, Mumbai, New Delhi, Bombay, Karachi, and Islamabad. The interdiction unit continues to improve its ability to identify male Ghanaian/Nigerian/Tanzanian drug “mules,” which typically swallow drugs to smuggle them. However, the airport interdiction unit relies heavily on tips from other countries to identify the drug mules. The Ethiopian government reports that the overall volume of drugs interdicted has been low, as most seizures involve airline passengers carrying small quantities in luggage or on their person.

The Counter Narcotics Division (CND) was formed in 1993 and it coordinates drug enforcement in all regions of the country. There are about 150 officers in the CND that has provided training to regional police by translating DEA training manuals into Amharic. The CND also conducts drug awareness initiatives among the public and undertakes drug (cannabis) eradication. There are currently ten people working in Criminal Intelligence, and twenty people working on Airport Interdiction. The CND needs to increase its airport surveillance capabilities and adopt a more effective risk assessment and passenger profiling system.

The CND provided statistics from 1993-2002 on the number of arrests and seizures for heroin and cannabis. For heroin, 1993 was the peak year when thirty-six people were arrested and twenty-four kilograms of the drug were seized. For cannabis, 1997 was the peak year for seizures when 1,367 kilograms were seized, and 1998 was the peak year for arrests, when 771 people were arrested.

The Federal Police Counter narcotics Unit Acting Head Deputy Commander provided the following updated details on the amount of drugs seized by the Federal Police Counter narcotics Unit in 2006: 482 kilograms of cannabis, and 2.7 kilograms of heroin. Traffickers apprehended were Ghanaian, Tanzanian, Gabonese, British and mostly male. The total number of local users arrested in 2006 were: 118 Ethiopians (116 male, 2 female); 2 British nationals (both male); 1 French national (male); and 1 Sudanese national (male). Ethiopian Federal Police report having confiscated nearly 12 kilograms of heroin in 2005, and roughly 16 kilograms of heroin in 2004. On December 29, 2007, Ethiopian police arrested five Ethiopian nationals attempting to sell 73 kilograms of marijuana in one of the country’s largest drug busts in recent history.

**Corruption.** There is no evidence of government corruption related to illicit drugs. The Anti-Corruption Commission, created in 2001, was given substantial police powers to investigate corruption, and for a short while attracted considerable attention when it arrested and charged several high-level government officials with corruption (unrelated to drugs) in 2001 and 2002. Since then, the Commission seems to have become bogged down bureaucratically and is no longer a formidable organization. There have been no charges of drug-related corruption against government officials.

**Agreements and Treaties.** Ethiopia is a party to the 1988 UN Drug Convention, the 1961 UN Single Convention as amended by the 1972 Protocol and the 1971 UN Convention on Psychotropic Substances. Ethiopia has signed, but has not yet ratified, the UN Convention against Transnational Organized Crime and the UN Convention against Corruption.

**Cultivation/Production.** Cannabis is produced in rural areas throughout Ethiopia, of which a small portion is for export, primarily to neighboring countries. The use of machines to process raw cannabis into a paste to smuggle abroad is a relatively new development. The majority of cannabis is consumed at home, with quantities in both cases being moderate. Khat is grown widely in Ethiopia and is increasingly exported. While khat is legally produced in Ethiopia, it is considered to be an illicit and illegal drug in the United States.

**Drug Flow/Transit.** The amount of drugs transiting Ethiopia remains small to moderate. Heroin transits Ethiopia for markets in West Africa, Europe and the United States, primarily due to Ethiopia's good airline connections between those markets and Southwest/Southeast Asia. Ghanaian and Nigerian traffickers are increasingly using Ethiopia as a transit point. Drug trafficking within Ethiopia is a growing problem as lax cargo inspections at airports in the country have made the transshipment of heroin from Pakistan and Afghanistan an increasingly significant problem.

**Domestic Programs.** The only domestic program to combat narcotics in Ethiopia is the IDCS, which has both an enforcement and limited drug education role. The ICDS' education unit aims to increase public awareness by partnering with counternarcotics clubs in high schools. Further, the education unit trains domestic police on how to detect and control drugs in all areas of Ethiopia.

## IV. U.S. Policy Initiatives and Programs

**Policy Initiatives.** The United States is working to raise the profile of crime-related issues and encourage criminalization of money laundering.

**The Road Ahead.** Ethiopia is likely to remain a moderate trafficking center for Africa because of its airport, transiting and the flight arrangements described above. The GOE's goal is to partner with the international community to improve its detection capabilities. While Ethiopia is not a significant producer, trafficker, or consumer of narcotic drugs, its location among the major narcotics routes—linking Southeast/Southwest Asian heroin production, European markets, and West African trafficking networks—make it a prime candidate for continued drug trafficking and transiting.

# Ghana

## I. Summary

Ghana has taken steps to combat illicit trafficking of narcotic drugs and psychotropic substances and has mounted efforts against drug abuse. It has active enforcement, treatment, and rehabilitation programs; however, corruption and a lack of resources seriously impedes interdiction efforts. A national narcotics scandal in 2006, involving allegations of official complicity in narcotics trafficking complicated Ghana's efforts to combat the drug trade, but served to focus public attention on the growing problem. Ghana made limited efforts to combat the increasing drug flow in 2007, and arrests and seizures were down from 2006, although they were higher than 2005. Ghana-U.S. law enforcement coordination was strong in 2007, particularly at the policy level, but operational cooperation remained strained by the narcotics scandal, where seized narcotics in police custody went missing. Interagency coordination among Ghana's law enforcement entities also remained a challenge. Ghana is a party to the 1988 UN Drug Convention.

## II. Status of Country

Ghana has become a significant transshipment point for illegal drugs, particularly cocaine from South America, as well as heroin from Southeast and Southwest Asia. Europe is the major destination, but drugs also flow to South Africa and to North America. Accra's Kotoka International Airport (KIA) is increasingly a focus for traffickers. Ports at Tema, Sekondi, and Takoradi are also used, and border posts at Aflao (Togo) and Elubo and Sampa (Cote d'Ivoire) have seen significant drug trafficking activity. In 2006, South American cocaine trafficking rings increased their foothold in Ghana, establishing well-developed distribution networks run by Nigerian and Ghanaian criminals. Ghana's interest in attracting investment provides good cover for foreign drug barons to enter the country under the guise of doing legitimate business. However, South American traffickers reduced their need to visit Ghana in person by increasing reliance on local partners, thus further insulating themselves from possible arrest by local authorities.

In 2006, a series of cocaine scandals, including allegations of police complicity in cocaine trafficking, complicated efforts at interdiction. In May 2006, five kg of cocaine went missing from a police evidence locker. An ensuing investigation, which received extensive domestic media attention, quickly expanded to other cases. In the most prominent case, security agencies interdicted a ship, the MV Benjamin, thought to have been carrying as much as two tons of cocaine, of which authorities only seized thirty kg. The scandal intensified when a secret recording surfaced that caught an Assistant Commissioner of Police and known narcotics traffickers on tape discussing why they had not been alerted to the two ton cocaine shipment. The trial in this case is ongoing. The ruling party and the opposition political parties used the scandals to accuse each other of allowing the country to become a transshipment point for cocaine and heroin bound for other countries. The Government of Ghana (GOG) created a special commission after this case which identified several policy recommendations to lessen the chances of similar scandals in the future but, to date; the government has acted on only a handful of the recommendations. As a result of these scandals, a handful of law enforcement officials lost their jobs and the government renewed its focus on how to combat the narcotics trade. The Narcotics Control Board (NCB) welcomed a new Director, in June 2007.

Trafficking has also fueled increasing domestic drug consumption. Cannabis use continues to increase as does its cultivation locally. Law enforcement officials have repeatedly raised concerns that narcotics rings are growing in size, strength, organization and capacity for violence. The government has mounted public education programs, as well as cannabis crop substitution programs. Diversion of precursor chemicals is not a major problem.

### III. Country Action Against Drugs in 2007

**Policy Initiatives.** The Narcotics Control Board (NCB) coordinates government counternarcotics efforts. These activities include enforcement and control, education, prevention, treatment, rehabilitation, and social reintegration. The two top officials at the NCB were suspended at the outset of the 2006 narcotics scandal. The top official was ultimately replaced, but the NCB remained without an operations chief until June 2007. In 2007, the NCB launched an intensive awareness campaign on radio and television to combat trafficking and created a new position which deals with demand reduction. In 2007, the NCB implemented a three year plan which focuses on strengthening operational capacity, promoting awareness and decentralizing NCB's operations. With the decentralization plan, the NCB plans to station officers in all major cities and border posts. NCB officers will be assigned to Kumasi and Tamale and the border posts at Aflao (Togo) and Elubo (Cote d'Ivoire) by year's end. As part of its rebuilding in 2007, the NCB hired 40 new officers during the year and plans to hire an additional 60 by the end of the year. The Ministry of Interior set up a fact-finding committee in 2006, to investigate the cocaine scandals and the UNDP funded a series of experts' meetings to develop a new national drug policy and make recommendations on improving the country's counternarcotics efforts. The series of meetings are ongoing. Ghana and the UNODC signed a compact in February, which will create a joint port control team to inspect cargo arriving at Ghana's ports. The compact includes the donation of scanners and training for Ministry of Interior officials.

Each year since 1999, the NCB has proposed amending the 1990 narcotics law to fund NCB operations using a portion of seized proceeds, but the Attorney General's office has not acted on this proposal. In 2006, the Attorney General succeeded in amending the narcotics law to allow stricter application of the bail bond system (i.e., no general granting of bail when flight is a real possibility; higher sureties to assure that defendants appear for trial) in response to NCB complaints that courts often release suspected smugglers, including foreign nationals, on bail that is often set at only a tiny fraction of the value of the drugs found in a suspect's possession. In 2007, this amendment has worked well, as defendants are not released as easily as before. The NCB also called for amendment, without success, of PNDC Law 236 (1990) to enable it to confiscate property and assets purchased by identified drug dealers using illegal proceeds. The Minister of Interior said in October that the government plans to amend the law soon. The government began drafting a Proceeds of Crime bill and a Money Laundering bill in 2006, and final drafts were reportedly near completion by year's end 2007. The government plans to present the money laundering bill to parliament as soon as it is finished.

**Law Enforcement Efforts.** In 2007, Ghanaian law enforcement agencies continued to conduct joint police-NCB operations against narcotics cultivators, traffickers, and abusers. NCB agents, who are not armed, rely upon the police's Criminal Investigative Division's (CID) narcotics unit in situations requiring armed force. The Ghana Police Service has assigned several investigators to narcotics cases, holds suspects in its cells and prepares such cases for presentation at trial. The NCB continued to work with DHL, UPS, and Federal Express to intercept packages containing narcotics. The NCB reported that it seized 286 kg total drug seizures of cocaine, heroin, and

cannabis from January to October 2007. The NCB said narcotics rings find trafficking cocaine to Europe easier and more profitable than obtaining heroin from the Far East and trafficking it to the U.S.

The NCB reported that from January 2006 to October 2007, 71 convictions were made against traffickers. In 2007, 41 individuals were arrested, but only 10 were convicted and sentenced, a decrease from 2006. The Ghana Police reported that, from January to September, it had 452 cases in various stages of investigation and prosecution. This represents a 26 percent increase in narcotics cases over the same period in 2006; while marijuana cases increased nearly 50 percent, suggesting that narcotics consumption among Ghanaians is increasing. Cases involving cocaine and heroin decreased by one-third. In addition to a number of Ghanaians, courts prosecuted citizens of other countries in cases involving cocaine and heroin trafficking, including a Nigerian who was on Ghana's most wanted list. At year's end, the courts had 31 cases pending. The NCB reported that the price of cannabis increased sharply in 2007, possibly as a result of eradication efforts. The price of a small parcel of cannabis (the size of a loaf of bread) in 2007 was approximately 10-15 cedis (\$10.86-\$16.29), while a wrapper or joint sold for 20 Ghana Pesewas (\$0.22-\$0.54), from two to five times the price in 2005. The NCB and other law enforcement agencies continued their successful cooperation with U.S. law enforcement agencies in 2006, until the eruption of the narcotics scandal, which forced U.S. agencies to reduce cooperation until the NCB could reconstitute itself. There were no narcotics-related extraditions to or from the United States in 2006, however, in 2007, Ghana expelled two Afghan nationals it arrested on suspicion of narcotics trafficking and placed them in U.S. custody. The two are now awaiting trial in the U.S. In 2007, Ghana also provisionally arrested a Ghanaian national wanted in the United States on charges of conspiracy to distribute and import heroin. The extradition hearing is pending.

**Corruption.** Ghana does not, as a matter of government policy, encourage or facilitate illicit production or distribution of narcotic or psychotropic drugs or other controlled substances, or the laundering of proceeds from illegal drug transactions, nor is any senior official known to engage in, encourage, or facilitate narcotics production or trafficking. Despite the regular arrests of suspected narcotics traffickers, Ghana has an extremely low rate of conviction, which law enforcement officials indicate is likely due primarily to corruption within the judicial system. The backlog of cases pending trial and the limited resources facing the judiciary remain problems in controlling drug trafficking in Ghana. In October 2005, a supervisor of KIA's cargo handling company was arrested attempting to smuggle cocaine using an airport tractor, taking advantage of his access to an airplane. This official was sentenced in March to a 15-year prison term. Also in March, three employees of KIA were arrested when 70 kilograms of cocaine were found in a Duty Free shop near the business class lounge.

Corruption among law enforcement officials remained a serious problem in 2007. In April, eight police officers were arrested for taking parcels of cocaine from a trafficker to sell them personally. A district court released the officers in June, but the Attorney General ordered them rearrested immediately. They are currently awaiting trial. In a separate case in June, nine police officers were arrested attempting to retrieve parcels of cocaine along Ghana's coast near Takoradi. Two other police officers were arrested in October for attempting to escort narcotics couriers through Police checkpoints. During the month of May, 50 police officers were arrested for misconduct during an operation aimed at ridding the Police Service of corrupt officers. In October, 19 more Ghana Police officers were dismissed for misconduct. In 2006, two officers from the Bureau of National Investigations were suspended for having inappropriate contact with Nigerian drug traffickers and an Assistant Commissioner of Police and five other officers were arrested for their alleged direct

involvement in the trafficking of the cocaine, which went missing from the MV Benjamin. Though no charges of corruption were brought, the two top officials at the Narcotics Control Board were suspended for dereliction of duty in allowing five kg of seized cocaine to disappear from a police evidence locker.

**Agreements and Treaties.** Ghana is a party to the 1988 UN Drug Convention, the 1971 UN Convention on Psychotropic Substances, and the 1961 UN Single Convention, as amended by the 1972 Protocol. U.S.-Ghana extradition relations are governed by the 1931 U.S.-U.K. Extradition Treaty. In 2003, Ghana signed a bilateral Customs Mutual Assistance Agreement with the United States. In July 2006, Ghana ratified both the UN Convention against Corruption and the African Union Convention on Preventing and Combating Corruption.

**Cultivation and Production.** Cannabis (also known as Indian hemp) is widely cultivated in rural farmlands. The Volta, Brong-Ahafo, Eastern, Western, and Ashanti regions are principal growing areas. Most cannabis is consumed locally; some is trafficked to neighboring and European countries. Cannabis is usually harvested in September and October, and law enforcement teams increase their surveillance and investigation efforts at these times. NCB, together with the Ghana Police investigated several cases of cannabis production and distribution, and destroyed cannabis farms and plants in 2007. In October 2005, a joint operation between the NCB and police destroyed three acres of cannabis in Akatsi and took two Ghanaians and two Jamaicans into custody. In February 2003, the NCB implemented a pilot program designed to reduce the area under cultivation. Under the terms of this project, 140 marijuana cultivators volunteered to give up marijuana in exchange for government assistance with planting and processing new food crops and immunity from prosecution. The NCB expanded the program from 120 farmers in 2004 to 325 in 2005, but did not have funds to expand the program further in 2006 or 2007. NCB reports, however, that by 2006 cultivation in targeted areas had gone down. To provide alternative income to farmers growing cannabis, the Ministry of Women and Children's Affairs donated two cassava-processing plants to a community in Essam, Eastern Region in 2005.

**Drug Flow/Transit.** Cocaine and heroin are the main drugs that transit Ghana. Cocaine is sourced mainly from South America and destined for Europe, while heroin comes mainly from Southeast and Southwest Asia on its way to Europe and North America. Cannabis is shipped primarily to Europe, specifically to the United Kingdom. Law enforcement officials report that traffickers are increasingly exploiting Ghana's relatively unguarded and porous maritime border, offloading large shipments at sea onto small fishing vessels which carry the drugs to shore undetected. Narcotics are often repackaged in Ghana for reshipment, hidden in shipping containers or secreted in air cargo. Large shipments are also often broken up into small amounts to be hidden on individuals traveling by passenger aircraft. The most common individual concealment methods utilize false bottom suitcases or body cavity concealment. Arrests in 2007 revealed a variety of creative concealment methods, including cocaine hidden inside women's specially designed underwear, cans of palm oil and containers of yoghurt, and bricks of marijuana hidden in false-bottom crates which contained handicrafts bound for Europe.

Officials at UK airports found that the total tonnage of trafficked narcotics seized from passengers on flights originating in Ghana eclipsed those from Nigeria in 2006. In partial response to this trend, the British Government launched a program deploying experienced U.K. customs officers and state of the art ion scan detection equipment to Kotoka International Airport. The program is scheduled to last one or two years, and involves training Ghanaian customs officers on how to use the equipment, profiling, targeting, intelligence-gathering and other security techniques. From the



program's inception in November 2006 to September 2007, it has seized nearly 350 kg of cocaine, 2,200 kg of cannabis and 1 kg of heroin. There is no hard evidence that drugs transiting Ghana contribute significantly to the supply of drugs to the U.S. market. However, there are indications that direct shipments to the United States—particularly of heroin—are on the rise, fueled by an increase in shipments of heroin to Ghana from Pakistan and Afghanistan in 2006. In November 2004, two alleged leaders of a drug smuggling ring from Ghana were indicted in Columbus, Ohio for shipping heroin for distribution across central Ohio, indicating a direct flow of illicit narcotics from Ghana into the U.S. Midwest. The November 2005 arrest of a Ghanaian parliamentarian indicated a similar flow of heroin to the New York area, and in 2006 a significant number of Ghanaians were arrested in the United States for trafficking heroin. In October 2007, two Afghan nationals were arrested by the Ghana Police, expelled by the government, and flown to the U.S. for conspiring to distribute heroin in the U.S.

In the past, direct flights from Accra played an important role in the transshipment of heroin to the U.S. by West African trafficking organizations. In July 2004, the Federal Aviation Administration banned Ghana's only direct flights to the United States for safety reasons. However, this did not appear to reduce the trafficking of drugs between the two countries. Instead, drug traffickers rerouted the flow through Europe, according to the NCB. In addition to multiple carriers providing connecting flights to the United States via Europe, direct air links were re-established in 2005, with a second airline adding non-stop service between Ghana and the United States in December 2006, in addition to multiple carriers providing connecting flights to the United States via Europe, which may result in increased attempts at smuggling by direct air links.

In 2006, the U.S. Embassy uncovered widespread visa fraud associated directly with drug trafficking organizations, further raising fears of highly organized smuggling rings attempting to carry drugs into the United States from Ghana by air. The NCB reported that in response to increased vigilance against West African drug mules arriving at foreign airports, a new trend appears to be use of Caucasians as carriers of narcotics to arouse less suspicion by customs and immigration officials at European and U.S. airports. Two teenage British citizens were caught in July attempting to smuggle six kilograms of cocaine to London. The two remain in custody in Accra awaiting their trial date. Despite concerns with increased use of air travel for drug transshipment, however, the primary problem remains Ghana's long, relatively unpatrolled coastline.

**Domestic Programs.** The NCB works with schools, professional training institutions, churches, local governments, and the general public to reduce local drug consumption. The Ministries of Health and Education further coordinate their efforts through their representatives on the Board. Board Members and staff frequently host public lectures, participate in radio discussion programs, and encourage newspaper articles on the dangers of drug abuse and trafficking. Although treatment programs have generally lagged behind preventative education and enforcement due to lack of funding, in 2007, the NCB announced that it has established treatment centers to assist addicts, adding to the. Three government psychiatric hospitals which receive drug patients and three private facilities in Accra run by local NGOs. The NCB's national drug education efforts continued in schools and churches, heightening citizens' awareness of the fight against narcotics and traffickers. In 2007, the NCB continued broadcasting TV programs to explain narcotics' effects on the human body, individual users and society. These programs are broadcast on state television in local languages. In partial response to the narcotics scandal, the NCB also began efforts to sensitize coastal fishermen on the dangers of getting involved in the drug trade and on the need to cooperate with law enforcement officials. In 2006, the Regional Minister for the Central Region (where many

fishing ports are located) met with local fishermen to discuss the problems of drug trafficking. The Government of Ghana, with UK assistance, launched Operation Hibiscus in October to spread awareness about the dangers of transporting narcotics. This program, featuring a cartoon character, will be carried in print and on television.

### IV. U.S. Policy Initiatives and Programs

**Bilateral Cooperation.** The USG's counternarcotics and anticrime goals in Ghana are to strengthen Ghanaian law enforcement capacity generally, to improve interdiction capacities, to enhance the NCB's office and field operation functions, and to reduce Ghana's role as a transit point for narcotics. In 2002, the United States provided the Government of Ghana counternarcotics assistance in the form of surveillance and detection equipment, worth \$64,000, including two narcotics detection devices ("Itemisers") installed at Kotoka International Airport in December 2003. Similar equipment funded in FY 2000 and FY 2001 is effectively maintained and has facilitated a number of drug arrests and seizures. Ghana continues to benefit from training courses offered in FY 2002, 2004, and 2007. These interagency counternarcotics courses focused respectively on suppressing corruption, drug interdiction at Ghana's air and seaports, and narcotics investigations skills. In August 2005, the U.S. Government signed an agreement to provide Ghana's law enforcement agencies with an additional \$200,000 to fight narcotics trafficking. Under this funding, DEA provided a two-week basic narcotics investigations skills course for NCB and other GOG counternarcotics staff in November 2006. At the end of the training, the U.S. Embassy donated 25 sets of new Smith & Wesson handcuffs, provided by the Department of Justice, to the NCB. In 2007, following a DEA training course, the USG also donated drug-testing kits. The USG is also working with the Customs, Excise and Preventive Service (CEPS), and held a Customs training course in September. The USG is urging CEPS to establish an internal affairs unit that would strengthen internal anticorruption efforts along Ghana's borders. In August 2007, U.S. Customs and Border Protection and DEA presented a joint seaport border enforcement training, focusing on narcotics enforcement techniques to Customs, Excise and Preventative Service officials (CEPS). CBP and other USG's are also working with CEPS to establish an internal affairs unit that would strengthen internal anticorruption efforts along Ghana's borders.

**The Road Ahead.** Ghana made limited progress in 2007 in addressing its legislative and enforcement deficiencies, brought into the public eye by the 2006 narcotics scandals, and a long road lies ahead. The NCB's plan to hire sixty additional agents by year's end is a positive step forward. Tougher confiscation provisions, with a portion of such resources dedicated to fighting narcotics trafficking, would strengthen Ghana's counternarcotics regime. Better oversight of financial transactions is particularly important given the potential for any narcotics financial networks to be used by terrorist organizations or for internal corruption. Upgraded measures to combat corruption are also essential. Sea interdiction and surveillance capabilities need to be enhanced. These initiatives will require significant re-allocation of resources and a sustained political commitment, and it remains to be seen whether Ghanaian officials have the political will to see them through.

# Guinea

## I. Summary

Guinea is being used as a drug trafficking transit point to Europe. International narcotic traffickers take advantage of loose border controls and limited coastal patrolling capacity of many West African nations, Guinea included, using these countries as a launch point to lucrative drug markets in Europe and the U.S. Guinea's National Police and specifically their Office Central Anti-Drogue (OCAD) lack the staffing, training, and equipment to effectively enforce anti-narcotic laws. Guinea is a party to the 1988 UN Drug Convention.

## II. Status of the Country

Guinea has over the past five years become a regular transit/storage point for narcotics trafficking heading into Europe and to a lesser extent the United States, according to the Director of OCAD. Heroin, cocaine and amphetamines are imported into Guinea, stored for some time, and then moved through Guinea to markets largely in Europe. The dominant traffickers in the Guinean drug trade come from Nigeria, Colombia and Ghana. Marijuana is cultivated locally and abused traditionally in Guinea.

## III. Country Actions Against Drugs in 2007

**Policy Initiatives.** The deterrent effect of recent arrests and seizure of a large amount of cocaine that was transiting Guinea were undermined when part of the seized drugs and cash drug proceeds were stolen by several OCAD police. Following this event, the Director General of Police appointed a new Director and Deputy for OCAD.

**Law Enforcement Affairs.** OCAD attempts to aggressively pursue the largely foreign drug traffickers operating through Guinea. However, OCAD lacks almost everything—training, equipment, investigating skills, and organizational motivation—to accomplish its mission. No reliable statistics exist for drug seizures in Guinea.

**Corruption.** Extensive corruption throughout the government and law enforcement agencies contributes to the difficulty of effective counternarcotics law enforcement. It is not government policy to encourage or facilitate illicit production or distribution of controlled substances, or to launder the proceeds of any transactions involving these illicit products. However, there have been unconfirmed reports that relatives of senior government officials engage in and facilitate illicit distribution of drugs and the laundering of the proceeds from illegal drug transactions. No officials or their family members have been accused of, or prosecuted for these crimes.

**Agreements and Treaties.** Guinea is a party to the 1988 UN Drug Convention, the 1961 UN Single Convention as amended by the 1972 Protocol and the 1971 UN Convention on Psychotropic Substances. Guinea is a party to the UN Convention against Transnational Organized crime and its protocols against migrant smuggling and trafficking in persons, and has signed but has not yet ratified the UN Convention against Corruption.

**Cultivation/Production.** Marijuana is cultivated locally and abused traditionally in Guinea. There is no significant export of marijuana or hashish to countries beyond Guinea's immediate neighbors in West Africa.

**Drug Flow/Transit.** Guinean Authorities are unable to prevent Guinean territory from being used as a storage depot, and transshipment point by international narcotics gangs moving cocaine, amphetamines and heroin to markets predominantly in Europe. In the past Conakry's port has been the primary point for trafficking. Drugs were simply secreted in cargo heading for Europe. Recent reports indicate that human "mules" moving swallowed drugs to Europe are increasing in frequency, both through the seaport and the airport.

**Domestic Programs/Demand Reduction.** Authorities report that drug use is growing despite their best efforts to stop it, although most Guineans are extremely poor and have no money for drugs. Currently the only drug education programs run by the GOG are counternarcotics campaigns in the standard curriculum of secondary schools.

#### IV. U.S. Policy Initiatives and Programs

**Bilateral Cooperation.** There have been no State department-funded drug programs in Guinea, although funds for assistance might become available beginning in 2009. In 2007, the U.S. Coast Guard provided seamanship and maritime law enforcement training to Guinea.

**The Road Ahead.** Guinea is simply too poor to reduce the onslaught of drug traffickers. It will need training and equipment assistance from the international community and support over years before it will be in a position to effectively enforce its anti-narcotics laws. The USG will work to support needed training and equipment assistance from the international community and to develop Guinea's capacity to effectively enforce its anti-narcotics laws.

# Iran

## I. Summary

The Islamic Republic of Iran is a major transit route for opiates smuggled from Afghanistan and through Pakistan to the Persian Gulf, Turkey, Russia, and Europe. The largest single share of opiates leaving Afghanistan (perhaps 60 percent) passes through Iran to consumers in Iran itself, Russia and Europe. There is no evidence that narcotics transiting Iran reach the United States in an amount sufficient to have a significant effect. There are some indications that opium poppy cultivation is making a comeback in Iran, after a long period during which poppy cultivation was negligible. There are at least 3 million opiate abusers in Iran, and probably more, with 60 percent reported as addicted to various opiates and 40 percent reported as casual users. With record levels of opium production in nearby Afghanistan, the latest opiate seizure statistics from Iran indicate Iran is experiencing an epidemic of drug abuse, especially among its youth.

There is overwhelming evidence of Iran's strong commitment to keep drugs leaving Afghanistan from reaching its citizens. As Iran strives to achieve this goal, it also prevents drugs from reaching markets in the West. Iran claims that more than 3,500 Iranian law enforcement personnel have died in clashes with heavily armed drug traffickers over the last two decades, and Iran reports that 46 more died in the first seven months of 2007. Iran undoubtedly does lose many security forces during engagements with drug traffickers. But there is also a long simmering Baluch ethnic insurgency and general lawlessness in the same geographical region; it is not clear what proportion of Iran's reported personnel losses in this region come solely from narcotics-related engagements.

Iran spends a significant amount on counter drug-related activities, including interdiction efforts and treatment/prevention education. Estimates range from \$250 million to as much as \$800 million each year, depending on whether treatment and other social costs are included. Iran claims to have invested upwards of \$1 billion in its elaborate series of earthworks, forts and deep trenches to channel potential drug smugglers to areas where they can be confronted and defeated by Iranian security forces. Nevertheless, traffickers from Afghanistan and Pakistan and Iran itself continue to cause major disruption along Iran's eastern border. Iranian security forces have had excellent seizure results for the last several years by concentrating their interdiction efforts in the eastern provinces.

Iran is a party to the 1988 UN Drug Convention, but its laws do not bring it completely into compliance with the Convention. The UNODC is working with Iran to modify its laws, train the judiciary, and improve the court system.

## II. Status of Country

Iran is a transit country and a major consumer country of opiates and hashish. Entering from Afghanistan and Pakistan into eastern Iran, heroin, opium, and morphine are smuggled overland, usually to Turkey. Drugs are also smuggled by sea across the Persian Gulf, and some small share finds its way to Iraq. Although China is estimated to have the largest number of opiate abusers, Iran is itself a major opiate consuming country, with the highest share of population abusing opiates in the world. The UNODC estimates that 2.8 percent of the Iranian population between the ages of 15 to 64 used opiates in 1999 (latest complete survey data available). A 2005 Quick Assessment drug

use survey conducted by Iranian authorities, confirmed the accuracy of the earlier 1999 survey on drug abuse.

Many Iranian practitioners, especially in the treatment community, argue that the share of opiate abusers now is even higher than 2.8 percent of the population. Nevertheless, 2.8 percent is very high. It is almost five times the rate of opiate abuse in the U.S. (.6 percent). A continuing high share of unrefined opium in total opiate seizures made by Iranian enforcement (ca. 60 percent) through the first seven months of 2007 suggests that drug traffickers in Afghanistan have consciously decided to serve a growing opium market in Iran. Continuing large seizures of heroin and morphine base demonstrate no loss of interest among Afghan traffickers in meeting growing demand for heroin in Iran itself, and in Russia and Western Europe. These choices by traffickers and the record opium crops in Afghanistan over the last few years are contributing to what can only be termed an epidemic of opiate abuse in Iran.

### III. Country Actions against Drugs in 2007

**Policy Initiatives.** Iran might have swung back to emphasizing interdiction, as opposed to prevention/treatment as a response to its domestic narcotics abuse problems. Among the signs of increased emphasis on interdiction is a sharp increase in the number of enforcement personnel said to be engaged in drug interdiction (from 30,000 to 50,000), changes in leadership of interdiction forces, and reports that certain enforcement units are now equipped with more high tech equipment to counter drug traffickers. Among the types of gear claimed to be in use now are: unmanned surveillance vehicles, real-time commercial satellite imagery, and night vision equipment. Some of the equipment was supplied to Iran under western-backed assistance programs. Iran's number-one-in-the-world seizure results can be pointed to as the "payoff" from this heavy investment in interdiction. But, even with exceptionally good results for opiate seizures projected for 2007, Iran might only be seizing 7.6 percent of Afghanistan's 2006/07 opium harvest (615 MT out of a total 8000 MT produced), and perhaps only a slightly higher share (12.8 percent-615 MT of an estimated 4800 MT) of the Afghan opium said to have entered Iran. So as Iran's own reports on narcotics issues suggest, the only real solution for Iran is success in limiting opium production in Afghanistan.

**Law Enforcement Efforts.** UNODC Executive Director, Antonio Maria Costa visited Iran's Drug Control Headquarters in late 2006. Costa praised Iran's enforcement efforts and thanked Iran for preventing important quantities of opiates and other dangerous drugs from reaching markets in the West.

Iran pursues an aggressive border interdiction effort. A senior Iranian official told the UNODC that Iran had invested as much as \$1 billion in a system of mud walls, moats, concrete dams, sentry points, and observation towers, as well as a road along its entire eastern border with Pakistan and Afghanistan.

According to an official GOI Internet site, Iran has installed 212 border posts, 205 observation posts, 22 concrete barriers, and 290 km of canals (depth-4 m, width-5 m), 659 km of soil embankments, a 78 km barbed wire fence, and 2,645 km of asphalt and gravel roads. It also has relocated numerous border villages to newly constructed sites, so that their inhabitants are less subject to harassment by narcotics traffickers. While this elaborate system of fortifications no doubt plays an important role in narcotics control, Iran invested in this extensive barrier-type construction and fortification system on its eastern border region many years ago, well before the

burgeoning drug problem started in the mid-1990's, as security protection against a general lawlessness along its eastern border.

Some villagers organized into self-defense forces (Basij) have received training from the Iranian government, and on occasion even launch offensive operations against traffickers, bandits and ethnic insurgents. (Basij units also play a broader political role and are associated with suppression of internal dissent; the Basij fall under the authority of Iran's Revolutionary Guard Corps, an Iranian government entity designated under U.S. law for its support of terrorism). Security forces also periodically clash with Baluch tribesmen who are seeking more autonomy from the central governments in Iran and Pakistan in a long simmering conflict. These tribesmen are also an important element in narcotics trafficking and have traditionally smuggled goods across regional borders. Finally, there are numerous Afghan displaced persons and refugees on both sides of Iran's eastern border; some share of them also participate in drug trafficking. As a result, all three elements of lawlessness-narcotics trafficking, ethnic insurgency and smuggling occur simultaneously complicating the situation along Iran's eastern border.

Iran claims that 50,000 law enforcement personnel are regularly deployed along its border with Afghanistan and Pakistan. Interdiction efforts by the police and the Revolutionary Guards have resulted in numerous drug seizures. Iranian officials seized almost 360 metric tons (MT) of opiates (opium equivalent) during just the first seven months of 2007. Opiate seizures projected out for all of 2007—on track to be about 92 MT more than 2006—would set a new record for Iran's seizures of opiates (615 MT). Seizures at rates like those claimed in Iran surely strike a blow at narcotics criminals and their financiers. Iran and Pakistan alternate as the countries with the highest volume of opiate seizures in the world.

Iranian opiate seizures in the first seven months of 2007 demonstrated the following interesting trends:

Unrefined (raw) opium seizures continued to increase sharply; projected out for the year, they were on track to increase by 18.7 percent to 369.6 MT, a new record for Iranian raw opium seizures. Seizures of refined opiates (morphine base and heroin) projected out for the whole of 2007 are also on track to rise, but by a more modest 15.5 percent above their 2006 level;

The share of raw opium in total opiate seizures was 60.1 percent, a relatively high level in line with recent years' results. Given the weight and bulk advantage of shipping opiates as either heroin or morphine base (1/10<sup>th</sup> the weight and bulk), it would seem that trafficking groups in Pakistan and Afghanistan have made a conscious decision to serve the large and growing market for opium in Iran;

Heroin seizures were 25.6 percent of all opiates seized (opium equivalent), sharply up from last year's roughly 20.3 percent share; not since 1992 has the share of heroin seized been this high;

Morphine base seizures projected for the whole of 2007 were on track to decline by 16.6 percent and the share of seized morphine base in total opiates seized fell to just 14.3 percent of the total. Refineries in Afghanistan seem to be turning out more heroin, as opposed to morphine base. A large share of heroin and almost all of the morphine base transiting Iran is headed for markets in Europe (heroin) or for further refining (morphine base), and then on to markets in Europe.

NB. To compute shares of opiates seized in Iran accurately, we convert morphine base and heroin into opium equivalents by multiplying by a factor of ten.

Hashish seizures in Iran in 2006 were 59.5 MT. This represents a decline in seizures of 11.6 percent from seizures of 67.3 MT during all of 2005. Hashish seizures during the first seven months of 2007 were 55.6 MT. If this rate of hashish seizures could be sustained for the whole of 2007, total seizures for the year would increase by 70 percent over 2006's results and set a new record at 95.3 MT. Even under the assumption that Iranian enforcement has increased the efficiency with which they are seizing all drugs, these high seizure results for hashish together with the equally high results for opiates suggest an across-the-board explosion in demand for all drugs in Iran.

Iran also reports a category of drug seizures which it labels simply "other". This category of seizures, which probably represents seizures of synthetic drugs, and perhaps destruction of opium poppies and cannabis in place, has risen dramatically in the last several years. In 2003, "other" seizures were reported at 1,647 kg. Then in 2004 and 2005, seizures jumped to 12.4 MT and 13.5 MT, respectively. Seizures in this "other" category in the first seven months of 2007 were running at a 17.8 MT annual rate. If this rate of seizures/crop destruction could be maintained, it would represent a new high for this category. It is indicative of the overall drug problem in Iran that large quantities of synthetic drugs like Ecstasy and methamphetamine are seized there in addition to opiates. The considerable weight of drugs seized/burned also suggests that drug cultivation (poppy and cannabis) in Iran might be larger than previously thought. There have also been reports of the seizure/destruction of small synthetic drug laboratories in Tehran during 2007.

Drug offenses are under the jurisdiction of the Revolutionary Courts. Punishment for narcotics offenses is severe, with death sentences possible for possession of more than 30 grams of heroin or five kilograms of opium. Those convicted of lesser offenses may be punished with imprisonment, fines, or lashings, although it is believed that lashings have been used less frequently in recent years. Offenders under the age of 18 are afforded some leniency. More than 60 percent of the inmates in Iranian prisons are incarcerated for drug offenses, ranging from use to trafficking. Narcotics-related arrests in Iran during the first nine months of 2006 were running at an annual rate of almost 400,000, which is a typical level for the last several years. Twice as many drug abusers were detained as drug traffickers. Iran has executed more than 10,000 narcotics traffickers in the last two decades. As in other countries with serious drug abuse problems, many other crimes are associated with drug abuse; among these are armed robberies and assaults, home break-ins, and kidnappings for ransom.

**Corruption.** Corruption plays an important role in narcotics trafficking in Iran. Some corruption cases reached the courts in Iran, and were also featured in media reports, though few involving narcotics-related corruption. Although there is no specific indication that senior government officials aid or abet narcotics traffickers, comparison of the situation in Iran with that in other narcotics-transit countries suggests that in addition to corruption among lower/mid-level law enforcement, there is also probably involvement of higher level officials as financiers and protectors of narcotics traffickers. Nevertheless, punishment of corruption can be harsh, and the evidence is compelling that it is Iran's official policy to keep drugs from its people. A high-profile effort is currently under way in Iran to highlight corruption and discourage its spread, but some question the seriousness of this campaign since some at the top levels of government administration appear to escape punishment, and live luxurious life styles beyond what their official incomes could explain. (Although it is widely agreed inside Iran that official corruption is widespread, much of this corruption is related not to drugs but rather to senior officials' control of the huge industrial and trading conglomerates that control a majority of Iran's legal economic activity). Iran has signed, but has not ratified, the UN Convention against Corruption.



**Agreements and Treaties.** Iran is a party to the 1988 UN Drug Convention; however, its legislation does not bring it completely into compliance with the Convention, particularly in the areas of money laundering and controlled deliveries. The UNODC is working with Iran through the NOROUZ Program to modify its laws, train the judiciary, and improve the court system. UNODC has also begun to implement new assistance projects for Iran's courts and prosecutors after the recent Paris Pact review of Iran's counternarcotics efforts. The new assistance, which is projected to cost in excess of \$7.5 million, focuses on modernization of the courts, especially increased use of computerization in courts, transparency, and corruption reduction. Iran is also a party to the 1971 UN Convention on Psychotropic Substances, and the 1961 UN Single Convention as amended by the 1972 Protocol. Iran has signed, but has not yet ratified, the UN Convention on Transnational Organized Crime. Iran has shown an increasing desire to cooperate with the international community on counternarcotics matters. Iran is an active participant in the Paris Pact, a group of countries that actively seeks to coordinate efforts to counter opiate smuggling in Southwest Asia, and Iran hosted an expert round table and review of its counternarcotics efforts by this group in 2005.

**Cultivation/Production.** In 1998, and again in 1999, a U.S. survey of opium poppy cultivation in Iran and a detailed U.S. multi-agency assessment concluded that the amount of poppy being grown in Iran was negligible. The survey studied more than 1.25 million acres in Iran's traditional poppy-growing areas, and found no poppy production, although the survey could not rule out the possibility of some cultivation in remote areas. Iran is now generally viewed as a transit country for drugs produced elsewhere, but there are reports of opium refining near the Turkish/Iranian border. Recently, there have also been more indications in Iran's press of opium poppy cultivation in remote areas. The Iranian press reported in the spring and summer of 2006 about government interdiction force operations targeting opium poppy cultivation in isolated, mountainous regions of western Iran, northwest of Shiraz. They quote Iranian government officials who link the small-scale cultivation to the poverty of communities living in these isolated regions. But this indication that at least poppy production remains marginal contrasts with large reported seizures/destruction of drugs in the Iranian seizure category labeled "other". There is insufficient information to resolve this apparent contradiction, but the majority of observers view drug crop cultivation in Iran itself as marginal. Most refining of the opiates moving through Iran is done elsewhere, either in Afghanistan or in Turkey.

**Drug Flow/Transit.** Shipments of opiates enter Iran overland from Pakistan and Afghanistan by camel, donkey, or truck caravans, often organized and protected by heavily armed ethnic Baluch tribesmen from either side of the frontier. Once inside Iran, large shipments are either concealed within ordinary commercial truck cargoes or broken down into smaller sub-shipments. The Iranian town of Zahedan is reportedly a center for the opiate trade as it first enters Iran, and then moves westward. The Iranian government has tried to counter this problem by assigning a drug enforcement unit headquarters in Zahedan. Foreign embassy observers report that Iranian interdiction efforts have disrupted smuggling convoys sufficiently to force smugglers to change tactics and emphasize concealment more than they have in the past. The use of human "mules" is on the rise. Individuals and small groups also attempt to cross the border with two to ten kilograms of drugs, in many cases either ingested for concealment or hidden in backpacks or hand luggage. Trafficking through Iran's airports also appears to be on the rise, with numerous reports that couriers transit Iranian airports, bound for foreign destinations. There are even foreign trafficking rings operating in Iran, as was revealed recently when a large international trafficking group led by Africans and shipping drugs worldwide was apprehended. Still, many local traffickers in Iran move

drugs in large armed convoys on Iran's eastern border, and are ready for a fight if challenged. Interestingly, expatriate Iranian nationals play a prominent role in narcotics trafficking in Japan, though the drug of choice there is methamphetamine not opiates.

A large share of the opiates smuggled into Iran from Afghanistan is smuggled to neighboring countries for further processing and transportation to Europe. Turkey is an important transit point for these opiates, most of which are bound for consumption in Russia and Europe. Some refining of opiates takes place in the Kurdish areas of Turkey, and in other parts of Eastern Turkey. A large share of the morphine base, which represented almost 14.4 percent of all opiates seized in the first seven months of 2007, in Iran, is moving west for additional refining. Important quantities of the approximately 25 percent of opiates moving as heroin also transit Turkey on their way to Europe, while some heads to Russia. Significant quantities of raw opium are consumed in Iran itself, but some raw opium also moves on to the west as opium, while the largest share of opium, not consumed in Iran, is refined and consumed as heroin in Europe, and elsewhere. There is a northern smuggling route through Iran's Khorasan Province, to Turkmenistan, to Tehran, and then on to Turkey. The mountains and desert, which are sparsely populated along this route, make it hard to police. Traffickers are frequently well armed and dangerous, and residents appear complicit.

The southern route also passes through sparsely settled desert terrain, then passes through Tehran on its way to Turkey; some opiates moving along the southern route detour to Bandar Abbas and move by sea to the Persian Gulf states. Bandar Abbas also appears to be an entry point for precursor chemicals moving to refineries in Afghanistan. Such movement is facilitated by the fact that the goods are "in transit" and never officially clear customs and enter Iran. Iran actively participates in the international systems for pre-notification of exports for precursor chemicals, and maintains a licensing and inspection regime for domestic firms authorized to use dual-use precursor chemicals. Iran has also made a number of important seizures, mostly at Bandar Abbas, of acetic anhydride, used in the refining of heroin. All precursor chemicals seized were consigned to Afghanistan. Trafficking through Iran is facilitated by wide-spread smuggling traditionally used to provide necessities and small luxuries like TV satellite dishes, and to escape high taxation. There are also reports that enforcement authorities accept bribes to pass shipments, and fail to enforce laws that prohibit street sales of narcotics and other contraband inside of Iran.

Azerbaijan and Armenia provide alternative routes to Russia and Europe that bypass Turkish interdiction efforts. Additionally, despite the risk of severe punishment, marine transport is used through the Persian Gulf to the nations of the Arabian Peninsula, taking advantage of modern transportation and communication facilities and a laissez-faire commercial attitude in that area. The UAE is a prominent transshipment destination and small loads of opiates are smuggled across the Persian Gulf to be placed in containerized cargo shipments. Hashish moves extensively along this route, as well. Oman and Dubai appear to be important destinations, but some Iranian hashish even finds its way to Iraq. Iranian enforcement officials have estimated that as much as 60 percent of the opium produced in Afghanistan in past years entered Iran, with as much as 700-800 metric tons of opium consumed in Iran itself by its 3 million plus users.

**Domestic Programs (Demand Reduction).** Smoked opium is the traditional drug of abuse in Iran, but opium is also drunk, dissolved in tea. Opium and its residue are also injected by a small number of addicts. Iranians have clearly been using more heroin during the past several years. Heroin has not replaced opium, the traditional drug of choice in Iran, but the share of heroin in Iran's total opiate seizures has been rising since the mid-eighties and reached more than 25 percent (opium

equivalent) in the first seven months of 2007. Afghan traffickers are also apparently shipping proportionally less morphine base.

Continuing large seizures of opium by Iranian enforcement suggest that opium is readily available in Iran. Some heroin is smoked or sniffed, but a growing share is injected. There are also many reports that young people in Iran have turned aggressively to drug abuse as an escape from what they perceive as difficult economic and social conditions. Significant seizures of synthetic drugs are also regularly reported, and this year there were reports that synthetics were being produced in Iran itself. Since synthetic drugs are favored by young people, this suggests that they are driving drug abuse in Iran to even higher levels. There have also been regular reports of a concentrated or “crack” heroin, which is reportedly more pure than other heroin available in Iran. Where the standard rule-of-thumb holds that 8.5 to 10 units of opium are necessary to make one unit of heroin, crack heroin reportedly requires 15-20 units of opium input. Because of its intensity, crack heroin is associated with increased emergency room visits, and overdose deaths. Typical of comments appearing in the Iranian press is one report, quoting the head of Tehran’s Specialist Treatment Addiction Center saying that “crack heroin” use in Tehran had doubled in 2006. Seventy-five percent of all drug addicts reporting to the Center are users of crack/crystal heroin. Due to its highly addictive properties and very high purity/intensity, many addicts had died after injecting crystal heroin, according to the Director.

Ninety-three percent of Iranian opiate addicts are male, with a mean age of 33.6 years, and 1.4 percent (about 21,000) are HIV positive. The scale of the drug abuse problem in Iran forces it into the public arena. Under the UNODC’s NOROUZ narcotics assistance project, the GOI spent more than \$68 million dollars in the first year of project implementation for demand reduction and community awareness. The Prevention Department of Iran’s Social Welfare Association runs 12 treatment and rehabilitation centers, as well as 39 out-patient treatment programs in all major cities. A total of 88 out-patient treatment centers spread throughout Iran are now operational. Some 30,000 people are treated per year, and some programs have three-month waiting lists. Narcotics Anonymous and other self-help programs can be found in almost all districts, as well as several NGOs, which focus on drug demand reduction. There are now methadone treatment and HIV prevention programs in Iran, in response to growing HIV infection, especially in the prison population.

#### **IV. U.S. Policy Initiatives and Programs**

**Policy Initiatives.** In the absence of direct diplomatic relations with Iran, the United States has no counternarcotics initiatives in Iran. The U.S. Government continues to encourage regional cooperation against narcotics trafficking. Iran and the United States have expressed similar viewpoints on illicit drugs and the regional impact of the Afghan drug trade. In the context of multilateral settings such as the UN’s Paris Pact group, the United States and Iran have worked together productively. Iran nominated the United States to be coordinator of an earlier UN-sponsored coordination effort on narcotics called the “Six Plus Two” counternarcotics initiative. The U.S., for its part, has approved licenses which allow U.S. NGOs to work on drug issues in Iran.

**The Road Ahead.** The GOI has demonstrated sustained national political will and taken strong measures against illicit narcotics, including cooperation with the international community and costly interdiction of drugs moving into and through its territory. Iran’s actions support the global effort against international drug trafficking, and have won the praise of such knowledgeable observers of the international effort against narcotics as UNODC Director, Antonio Maria Costa.

Should broader bilateral policy events in the future provide an occasion for any U.S.-Iranian information exchange or cooperation on any official policy area, drug education or enforcement may be an early area for examination. Iran stands to be one of the major benefactors of any long-term reduction in drug production/trafficking from Afghanistan, as it is one of the biggest victims of the recent increase in opium/heroin production there now. The United States anticipates that Iran will continue to pursue policies and actions in support of efforts to combat drug production and trafficking.

# Iraq

## I. Summary

Senior Iraqi Government officials acknowledge that illicit drugs enter Iraq from Iran, some to be used by Iraqis, but most transshipped south out of Basra or north through Iraqi Kurdistan. However, officials deny that illicit narcotics are a major problem in Iraq. Indeed, faced with an active insurgency and intense sectarian violence, the Government of Iraq (GOI) maintains no drug-abuse-specific statistics. The Iraqi Ministry of the Interior (MOI) has reported no known production of illicit drugs in Iraq. The MOI, which also supervises the Border Security Police, does not track narcotics-related arrests or seizures.

According to the Ministry of Health (MOH), the health system is under-resourced and overwhelmed by trauma cases. Given the relatively modest drug abuse problems in Iraq, the MOH has not organized special treatment options for drug abuse. There are no controls over prescription drugs and no GOI focus on illegal drug use. Smuggling or theft of chemicals of any sort is usually related to bomb-making activities, not drug manufacture or abuse. Money laundering is widely employed to support sectarian militias and/or terrorist groups, but is less apt to be used to launder the proceeds of narcotics sales. The availability of both chemical precursors and money laundering networks illustrate Iraq's vulnerability to narcotics trafficking should the security environment improve. The three GOI anti-corruption agencies reported no corruption cases involving narcotics. Iraq is a party to the 1988 UN Drug Convention.

## II. Status of Country

Iraq is not a significant producer of illicit drugs or precursor chemicals. U.S.D.A. (Department of Agriculture) advisors in Iraq opined that most of Iraq is too arid to grow plants that could be used for illicit drugs. In the south, where sufficient water is available, efforts to farm marijuana instead of rice have not succeeded. Due to its geographical location near drug-producing countries (Afghanistan) and drug-consuming or transshipping countries (Iran), Iraq is a transit country for illicit drugs. Iraq's vast desert borders and tenuous security situation make it vulnerable to illicit drug smuggling operations. However, due to numerous military checkpoints and subversive activity outside of military-controlled areas, the amount of narcotics being smuggled in and through Iraq is estimated to be low. Iraq is not a major drug-consuming country: most Iraqis (80 percent of whom currently receive food rations from the government) would seem hard-pressed to find the cash to support a drug habit.

## III. Country Actions Against Drugs

**Policy Initiatives.** The U.S. Department of Defense (DoD), in conjunction with the Department of State (DoS) Bureau of International Narcotics and Law Enforcement (INL), has begun an extensive training program for Iraqi Border Security Agents. This basic skills training program for Iraqi Border Security Forces includes a module on narcotics.

**Law Enforcement Efforts.** While Iraq lacks a coordinated national anti-narcotics effort, several Iraqi police commanders have requested training from the U.S. in identifying and prosecuting narcotics traffickers. The U.S. DEA has sent test kits for narcotics to several police units. Training in how to use these kits is done by U.S. contractors. Several provinces have anti-narcotics units and

have requested funding, training and equipment for forensics laboratories to assist them in enforcing the strict anti-narcotics laws. To date, the GOI does not have official statistics on arrests and convictions for narcotics-related crime. The Iraqi Ministry of Justice (MOJ) reports that the vast majority of inmates confined in Iraq's prisons are there on terrorism-related charges. U.S. Customs and Border Protection (CBP) provides advisory and training assistance to Iraqi Department of Border Enforcement officials at high threat locations along Iraq's borders. CBP also provides assistance to Iraqi Customs, Immigration, and Border Guards to help ensure their policies, procedures, and capabilities enhance Iraqi border control efforts.

**Corruption.** While corruption is a serious problem in Iraq, Iraqi officials do not seem to be involved with narcotics-related corruption. Before 2003, the GOI enforced strict prohibitions on narcotics abuse; current Iraqi cultural norms discourage recreational drug use. Consequently, current GOI officials are not viewed as encouraging or facilitating illicit production or otherwise supporting drug-trafficking. INL has provided \$21 million in assistance from the FY-07 supplemental budget to train Iraqi anti-corruption agencies. Thus far, none of the corruption investigations undertaken have involved narcotics.

**Agreements and Treaties.** Iraq is a party to the 1988 UN Drug Convention, the 1961 UN Single Convention as amended by the 1972 Protocol and the 1972 UN Convention on Psychotropic Substances.

**Drug Flow/Transit.** Iraq is primarily a narcotics transit country. This presents many challenges for its new government. The border area, where most of the smuggling occurs, continues to experience violence and instability. The Commander of the Iraqi Drug Squad in the northern Kurdish province of Sulaymaniyah reported 117 arrests for drug smuggling over the past two years. His squad sees opium, heroin, and cannabis coming over the border in mule trains, cars and trucks operated by Iranian gangs. He reports that the drugs are moved on to Turkey, where the opium is refined into heroin. From there, the drugs move on to Western Europe.

**Domestic Programs.** With its current focus on anti-insurgency operations, the GOI has no domestic programs to respond to the relatively few instances of narcotics-related problems. There are no prescription drug controls in Iraq. Health officials believe that Valium, a drug found in Iraqi correctional facilities and health institutions, is the drug most commonly abused by the Iraqi population.

#### IV. U.S. Policy Initiatives and Programs

**Road Ahead.** The USG will continue to support the training of the Iraqi Defense Forces, the Iraqi Police, the anti-corruption agencies, the Border Security Forces, and economic policy-makers in terms of agriculture and banking. The U.S. will encourage Iraq to direct more resources towards narcotics-related crime and abuse, and will assist Iraqi ministries to improve their capacity in preparation for a period when improved security permits a more typical enforcement effort.

# Israel

## I. Summary

Israel is not a significant producer or trafficking point for drugs. The Israeli National Police (INP), however, report that in 2007 the Israeli drug market continued to be characterized by a high demand in nearly all sectors of society, and a high availability of marijuana, hashish, Ecstasy, cocaine, heroin and LSD. The intense security presence and surveillance along Israel's borders generally make it difficult for smugglers to bring drugs into the country. Consequently, Israel is not a significant transit country for drugs, although there was an increase in the transit of heroin through Israel from Jordan to Egypt. Israeli citizens have also been part of international drug trafficking networks in source, transit and distribution countries. In 2007, Ecstasy drug seizures remained generally consistent with those of previous years, with the exception of a one-time seizure of 777,000 Ecstasy tablets. Israel is a party to the 1988 UN Drug Convention.

## II. Status of Country

Israel is not a major producer of narcotics or precursor chemicals. The INP report that during the year 2007 the Israeli drug market was characterized by a high demand in nearly all sectors of society and a high availability of drugs, including marijuana, Ecstasy, cocaine, heroin, hashish and LSD. The INP estimates the annual scope of the Israeli market to be 80-100 metric tons of marijuana, 25 metric tons of hashish, 20 million tablets of Ecstasy, three metric tons of heroin, six metric tons of cocaine, and hundreds of thousands of LSD blotters. Officials are also concerned about the widespread use of Ecstasy and marijuana among Israeli youth, and say that juvenile usage mirrors trends in other Western countries. There is widespread concern about the abuse by minors of household items as inhalants, and the availability of chemical analogs of banned substances not explicitly prohibited under the law.

## III. Country Actions Against Drugs in 2007

**Policy Initiatives.** In 2007, the INP continued its general policy of interdiction at Israel's borders and ports of entry. The INP concentrated specifically on the Jordanian and Egyptian borders, where the majority of heroin, cocaine and marijuana enter Israel. Israel established a new Pharmaceutical Crime Unit (PCU) in the Ministry of Health, with a mandate to monitor prescription drug diversion, anabolic steroids, and designer drugs. The PCU is currently investigating the black market in Subutex (A licit, prescription opiate used in drug treatment) and illegal trafficking in prescription drugs such as Ritalin. The PCU will be attaching a "roving pharmacist" to the Customs Authority at points of entry.

**Law Enforcement Efforts.** Some seizure statistics have been revised from last year's report. In 2007, the INP recorded seizures of marijuana totaling 1,465 kg, down from 5,957 kg in 2006. To some extent, this reflects a market substitution of hashish for marijuana, although hashish seizures also declined to 734 kg, down from 964 in 2006. Heroin and cocaine seizures remained fairly constant at 94 kg and 35 kg respectively, as did LSD at 1,932 blotters. The INP opened 22,830 total drug offense files in 2007, a small decrease of 0.7 percent from the previous year. Of these, 14,750 were for use of dangerous drugs, 3,016 for trafficking in dangerous drugs, and 4,771 for possession of drugs in quantities indicating they could not solely be for personal use.

**Drug Seizures\***

<b>Cocaine (kg)</b>	
2007	35
2006	42
2005	169
2004	32.4
<b>Heroin (kg)</b>	
2007	94
2006	70.3
2005	140
2004	68.5
<b>Marijuana (kg)</b>	
2007	1,465
2006	5,032
2005	10,000
2004	16,020
<b>Hashish</b>	<b>(kg)</b>
2007	734
2006	898
2005	1,022
2004	913
<b>LSD (blotters)</b>	
2007	1,932
2006	11,476
2005	2,880
2004	75,741
<b>MDMA (Ecstasy tablets)</b>	
2007**	891,300
2006	112,985
2005	266,996
2004	313,802



<b>Opium (kg)</b>	
2007	0.0
2006	0.1
2005	8.4
2004	0.05
<b>Cathinone (kg)</b>	
2007***	0.0
2006	8.7
2005	7.2
2004	N/A

\*2007 data represents seizures from January through November.

Source of data: Israel National Police, Research Department.

\*\*Of the 891,300 Ecstasy tablets seized in 2007, 777,000 were seized from one container in the port of Haifa arriving from Europe.

\*\*\*Availability of Cathinone diminished after it was banned under Israeli law, but authorities continue to pursue analogs of the drugs.

The Government of Israel has taken steps to clarify a legal grey area concerning chemical analogs of illegal drugs, termed “dangerous substances.” Through slight alterations in the chemical components of drugs such as cathinone, GHB, and amphetamines, vendors have avoided conviction under existing legislation. As a result, many of the dangerous substances are readily available in city kiosks and are popular among youth. Municipal police, in cooperation with the Ministry of Health and the Israel Anti-Drug Authority, stage regular raids on kiosks that sell the analogs and are authorized to shut them down for one month. The inter-ministerial Committee on Psychoactive Drugs studies new drug trends, and makes recommendations for amendments to existing legislation. In 2007, the law was amended to include several new synthetic drugs now prevalent in Israel. Bans on 12 other substances are set to take effect on January 1, 2008.

**Corruption.** As a matter of government policy, Israel does not encourage or facilitate the illicit production or distribution of narcotic or psychotropic drugs or other controlled substances, or the laundering of proceeds from illegal drug transactions. In 2007, a number of public officials were under investigation for corruption-related offenses. Israel has signed, but not ratified, the UN Convention against Corruption. Israel does not have specific legislation for public corruption related to narcotics, but narcotics-related corruption is covered under its generic anticorruption legislation.

**Agreements and Treaties.** Israel is a party to the 1988 UN Drug Convention, the 1971 UN Convention on Psychotropic Substances, and the 1961 UN Single Convention on Narcotic Drugs as amended by the 1972 Protocol. A customs mutual assistance agreement and a mutual legal assistance treaty are also in force between Israel and the U.S. Israel ratified the UN Convention against Transnational Organized Crime in December 2006. Israel has been a member of the

Commission on Narcotic Drugs in the UN Office on Drugs and Crime (UNODC) since 2003, and was elected to a new term on January 1. Israel has signed but not yet ratified the UN Convention against Corruption. Israeli companies participate in UN operations Topaz and Purple to restrict the abuse of precursor chemical substances. Israel is one of 36 parties to the COE European Treaty on Extradition and has separate extradition treaties with several other countries, including the U.S. Under the umbrella of the UNODC, Israel has restarted bilateral cooperation with the Palestinian Authority on reducing demand and supply of narcotics. Israel also cooperates on a regular basis with the Anti-Narcotics Department in Jordan. This has resulted in increasingly effective control of the Israel-Jordan border area, as reflected in interdiction figures.

On January 10, 2007, a new Protocol to the Convention on Extradition between the United States and Israel entered into force. Significantly updating the 1962 convention, the Protocol replaces the outdated list of extraditable offenses with a modern dual criminality approach and provides for the temporary surrender for trial in the Requesting State of fugitives serving a prison sentence in the Requested State. In combination with Israeli domestic extradition law, the Protocol also provides a much-improved framework for dealing with fugitives who claim Israeli citizenship and residency and allows inclusion of hearsay evidence in U.S. extradition documents. Israeli domestic law regarding lapse of time in certain circumstances, however, may prohibit extradition of fugitives whose cases are more than 10 years old. This issue is being litigated in a pending U.S. extradition request for an alleged pedophile, who has been wanted for prosecution since 1985.

**Cultivation/Production.** The vast majority of drugs consumed in Israel are produced in other countries. The INP reported a continuing trend in the development of domestic marijuana hydroponics cultivating stations, with four grow operations raided in 2007 and ten in 2006. The hydroponics greenhouses/incubators were discovered in otherwise uninhabited rental homes in the more affluent central region of Israel, and the homes had been converted for the purpose of fulltime marijuana cultivation. The INP is currently researching whether such operations have succeeded in significantly increasing the THC content in marijuana. Domestically produced analogs of Ecstasy, dimethyl cathinone, and amphetamines were manufactured and available in many urban kiosks under a wide variety of ever-changing names. Cathinone is extracted from the “khat” plant, which is legal in Israel and widely cultivated within Israel’s Yemenite and Ethiopian immigrant communities. The INP seized 27 kg of paracetamol and other chemical substances in the Negev region, used by Bedouin smugglers to cut heroin.

**Drug Flow/Transit.** The intense security presence and surveillance along Israel’s borders generally makes it difficult for smugglers to bring drugs into the country. Thus, Israel is not a significant transit country for drugs, although Israeli citizens have been part of international drug trafficking networks in source, transit and distribution countries. As a result of the 2006 Second Lebanese War, security was tightened in the north, more drugs smugglers increased activity across the relatively peaceful borders with Jordan and Egypt, where Israel has fewer security resources deployed.

In 2007, Israel continued to be more of a transit country than a distribution country for heroin, with heroin primarily flowing from Jordan through Israel en route to Egypt. The Negev Bedouin tribes, using their knowledge of the desert terrain and their familial connections with Jordanian and Egyptian Bedouin, continued to facilitate most of the heroin trafficking across Israel. The INP reports that in 2007, 9.3 kg of heroin was seized on the Egyptian border, 23 kg on the Jordanian border, and 9.98 kg on the Lebanese boarder. The Israeli Bedouin trade the heroin in Egypt for cash, Moroccan hashish and marijuana, for which there is a large Israeli market. 36 percent of the

hashish and 87 percent of the marijuana seized by INP in 2007 was interdicted at the Egyptian border. This year, Moroccan and Afghan hashish traded across the Egyptian boarder largely displaced the previous source countries of Lebanon and Jordan.

The Customs division of the Israel Tax Authority (ITA) plays a key role in interdicting the transit of drugs through Israel's ports. In cooperation with the INP, 25 kg of heroin was discovered by the ITA in four operations along the Jordanian border; 13 kg of hashish was found in the Tel Aviv mail; 600g of cocaine was found in CD packages at Ben Gurion airport; ITA also detected the shipment of hundreds of thousands of Ecstasy tablets through the port of Haifa, along with 30kg of MDMA.

**Domestic Programs/Demand Reduction.** The Israel Anti-Drug Authority (IADA) is the primary agency responsible for designing and implementing domestic programs to reduce the demand for drugs. In 2007, the IADA implemented treatment programs targeted to women, youth, new immigrants, and other specific segments of the population. Israel pursues a harm-reduction approach in conjunction with aggressive enforcement, offering counseling, sanitary services, food, and needle exchange at clinics distributed throughout the country. If addicts are willing, they are taken directly to treatment facilities, where they cease taking drugs and have access to professional training and family therapy.

In 2007, the Ministry of Education and the IADA agreed to integrate drug prevention as a mandatory part of the school curriculum for all ages. The IADA is now providing instruction to K-12 teachers on how to conduct drug education. The Israel Defense Forces also agreed in 2007 to allow the IADA to provide drug prevention education to soldiers entering and exiting the military. In 2007, the IADA spearheaded the introduction of a prototype mobile drug detection unit that will be used to prevent the operation of motor vehicles by drivers under the influence. In an amendment to existing legislation, the GOI determined in 2007 that anyone refusing a drug or alcohol test will be considered under the influence. In 2007, alcohol abuse was added to the Authority's mandate.

#### IV. U.S. Policy Initiatives and Programs

**Bilateral Cooperation.** DEA Country Office In Nicosia, Cyprus and Israeli officials characterize cooperation between the DEA and INP as outstanding. The ITA also maintains direct cooperation with Immigration and Customs Enforcement offices in Rome, and has conducted joint anti-smuggling operations. There is a monthly bilateral exchange on major drug seizures in both countries. The Pharmaceutical Crime Unit works directly with the DEA on anabolic steroid efforts, and will be receiving a course on dual-use drug precursor diversion in 2008.

**Road Ahead.** The DEA Country Office in Nicosia, Cyprus looks forward to continued cooperation and coordination with its counterparts in the Israeli law enforcement community. The INP is seeking to strengthen relationships between law enforcement agencies in other countries, and works through the Office of International Relations within the IADA to pursue this objective. Scientists at the IADA would like to establish a relationship with the National Institute on Drug Abuse and the Office of National Drug Control Policy, to facilitate exchanges between the two agencies.

# Jordan

## I. Summary

Jordan's geographical location between drug producing countries to the north and east and drug consuming countries to the south and west continues to make it primarily a transit point for illicit drugs. This being the case, the Public Security Directorate (PSD) perceives that the amount of drugs transiting through Jordan continues to grow. Historically, Jordanians do not consume significant quantities of illegal drugs, and according to the PSD there are no known production operations in the country. Statistics for the first 11 months of 2007 show total drug cases for the year will be on par with the numbers from 2006. The number of persons involved and the number of abusers are also consistent with those from 2006. The PSD attributes the lack of any substantial increases to Jordan's enhanced rehabilitation programs, increased border interdiction operations, better intelligence gathering, and stronger cooperation between Jordan and neighboring countries. The drugs of choice among users arrested for drug possession in Jordan continue to be cannabis and heroin. The age range for people arrested for drug related crimes is predominantly between 18 and 35 years old. The PSD continues to see an increase in drug trafficking through its border regions, especially with Iraq, and drugs transiting Queen Alia International Airport (QAIA). Jordan is a party to the 1988 UN Drug Convention.

## II: Status of Country

There are currently no indications that Jordan will move from a predominantly drug transit country to a drug producing country. Statistics produced by the PSD-AND (Public Security Directorate-Anti-Narcotics Agency) confirm this assessment. Jordan's vast desert borders make it vulnerable to illicit drug smuggling operations. Jordanian authorities do not believe that internal drug distribution is important; they believe most drugs entering Jordan are moving to markets elsewhere.

## III: Country Actions Against Drugs in 2007

**Policy Initiatives.** Jordan continues its drug awareness campaign focused on educating people of the dangers of drug use. This includes providing educational presentations in schools and universities throughout the country. The PSD-AND has created a program it calls "Friends of the AND." This program sends volunteer civilians into the schools, universities, and other community centers to speak out against drug usage. Jordan has also implemented an outreach program for the country's religious institutions whereby some Imams are trained and given literature on drug prevention topics for inclusion in religious services. Jordan publishes a number of brochures and other materials aimed at educating Jordan's youth on the dangers of drug abuse. Jordan is in its third year of producing cartoons aimed at younger children designed to dissuade youngsters from trying drugs. Jordan will be taking this program to the next level when it will make counternarcotics abuse movies directed at Jordanian youths in the near future. PSD publishes an anti-narcotics magazine, and maintains a website in English and Arabic for drug abuse awareness and prevention (<http://www.anti-narcotics.psd.gov.jo/English>).

Jordan has also worked with the UNODC in providing drug prevention training. In early 2006, Jordan provided the first of a series of drug interdiction training to Palestinian anti-narcotics officers. In mid 2007, Jordan was included in a regional program to increase access to prevention services for drug use and HIV/AIDS in prison settings. In late 2007, Jordan implemented a

program to strengthen community resources in providing drug abuse treatment and rehabilitation for vulnerable groups in the country.

**Law Enforcement Efforts.** Jordan's PSD maintains an active anti-narcotics bureau, and established excellent relations with the U.S. Drug Enforcement Administration (DEA), Nicosia Country Office based in Cyprus. PSD-AND has seen an increase in cocaine and other drug trafficking through QAIA (Queen Alia International Airport) and has increased interdiction efforts there. GOJ authorities continue utilizing x-ray equipment on larger vehicles at its major border crossings between Syria and Iraq. This practice netted numerous drug seizures in past years and continues to do so in 2007. Seizures of captagon tablets are about the same as last year. However, recent Jordanian media coverage has highlighted captagon seizures giving the perception of increased trafficking of this drug. PSD claims not to have observed any widespread use of the drug in Jordan.

### Drug Seizures

Calendar Year	2004	2005	2006	2007 (11 Months)
Cannabis kg	1,931.017	1,485.477	793.715	340.793
Heroin kg	186.12	117.842	131.300	42.833
Cocaine kg	32.97	0.485	5.260	7.474
Hashish Oil Lit.	—	35.5	14.5	—
Captagon (Tablets)	9,774,002	11,158,083	10,944,870	10,079,616
Opium kg	21.9	3.5	19.928	—
Total Drug Cases	1,691	2,041	1,973	1,896
Number of Arrests	2,514	4,792	3,158	3,252
Number of Abusers	2,158	4,027	2,577	2,526

The PSD reports that 85 percent of all seized illicit drugs coming into Jordan are bound for export to other countries in the region. Drugs moving through Jordan include cannabis entering from Lebanon and more now from Iraq, heroin from Turkey entering through Syria on its way to Israel, and captagon tablets from Bulgaria and Turkey entering through Syria on the way to the Gulf. The majority of Jordan's drug seizures take place at the Jaber border crossing point between Jordan and Syria, although seizures from Iraq (Karama/Trebil border crossing) have risen significantly the last two years. For the last four years, the PSD has continued to observe an increase in trafficking of hashish and opium from Afghanistan through Iraq into Jordan.

**Corruption.** Jordanian officials report no narcotics-related corruption investigations during 2007. There is currently no evidence to suggest that senior level officials are involved in narcotics

trafficking. As a matter of government policy, Jordan does not encourage or facilitate illicit production or distribution of narcotic or psychotropic drugs or other controlled substances, or the laundering of proceeds from illegal drug transactions.

**Agreements and Treaties.** Jordan is party to the 1988 UN Drug Convention, the 1971 UN Convention on Psychotropic Substances and the 1961 UN Single Convention as amended by the 1972 Protocol. Jordan is a party the UN Convention against Corruption and has signed but not ratified the UN Convention against Transnational Organized Crime. Jordan continues to remain committed to existing bilateral agreements providing for counternarcotics cooperation with Syria, Lebanon, Iraq, Saudi Arabia, Turkey, Egypt, Pakistan, Israel, Iran, and Hungary. Jordan signed a Customs Mutual Assistance Agreement in 2004.

**Cultivation and Production.** Existing laws prohibit the cultivation and production of narcotics in Jordan. These laws have been effectively enforced. The majority of Jordan's territory is also not suitable for the cultivation of narcotic drug plants such as marijuana and opium poppy.

**Drug Flow/Transit.** Jordan remains primarily a narcotics transit country. Jordan's main challenge in stemming the flow of illicit drugs through the country remains its vast and open desert borders. PSD-AND reports, however, that drug flow through QAIA is on the rise. While law enforcement contacts confirm continued excellent cooperation with Jordan's neighbors, the desolate border regions and the various tribes, with centuries-old traditions of smuggling as a principle source of income, make interdiction outside of the ports of entry difficult. None of the narcotics transiting Jordan are believed to be destined for the United States. Jordan is bordered by Israel and the West Bank on the west, Syria on the north, and Iraq and Saudi Arabia to the east. Most of Jordan's borders are difficult to effectively patrol. The stationary posts along these areas lack the equipment and infrastructure to effectively patrol and monitor border traffic.

**Domestic Programs/Demand Reduction.** Jordan increased the scope of its programs on drug abuse awareness, education, and rehabilitation in 2007. Education programs target high schools, colleges, prison inmates, and religious institutions. Authorities continue to provide educational presentations in schools and universities throughout the country. As noted above, Jordan created the "Friends of the AND" Program to increase access to at risk youth. Jordan also publishes a number of brochures and other materials aimed at educating the country's youth. Jordan's anti-narcotics cartoon program aimed at younger children and designed to dissuade youngsters from trying drugs has continued to flourish. Cultural and religious norms also help to control drug use. In conjunction with the UNODC, Jordan has again strengthened its treatment and rehabilitation services for drug abusers in the country.

The national treatment and rehabilitation strategy and coordination mechanism has proven effective, and Jordan looks to continued successes in this strategy. A new, larger rehabilitation facility that will accommodate more patients is in the planning phase and PSD hopes to begin construction in the near future. PSD reports that it has treated over 165 patients at its drug rehabilitation center to date in 2007. PSD also noted that another highlight of the center's success is the number of patients the Government of Lebanon has sent to Jordan for rehabilitation. The PSD notes that this is another indicator of the strong levels of cooperation between the Governments of Lebanon and Jordan in their anti-narcotics efforts.

The Jordanian Drug Information Network (JorDIN) was officially established in 2005 with help from the UNODC. Jordan continues to develop the network which will serve as an information sharing institution for all of Jordan's treatment providers and anti-narcotics authorities. PSD plans

to fully implement JorDIN in early 2008. The network will reportedly provide accurate statistics of Jordan's drug abusers and levels of treatment success.

### IV. Policy Initiatives and Programs

**Policy Initiatives.** The DEA Nicosia Country Office, RSO Amman, and the PSD have an excellent working relationship. The DEA and the interagency Export Control and Related Border Security (EXBS) Program are in the process of providing Jordan with additional equipment to help Jordan's Border security operations. There are several miles of Jordan's borders that are patrolled only by the PSD's Anti-Narcotics Department. The equipment would include sensitive technologies such as night vision devices, portable thermal imaging units, and all-terrain vehicles. To date, licensing and export agreements have not been approved for some of these technologies. The equipment would also be extremely beneficial to Jordan's anti-narcotics programs. In October 2007, EXBS provided PSD with a portable x-ray van for use in screening containers and vehicles at the Port of Aqaba. This equipment primarily screens for weapons, but can detect density anomalies that may indicate the presence of drugs and/or other contraband. Other ongoing GOJ and USG efforts to strengthen border security measures following the Iraq-based terrorist attacks in Amman and Aqaba in 2005 have served to enhance Jordan's detection capabilities and to disrupt the flow of illegal drugs transiting through Jordan. U.S. Customs and Border Protection (CBP) has supported USG efforts to strengthen Jordan's border security capabilities through the EXBS program and customs capacity building. Though both the EXBS program and capacity building support the implementation of international standards to secure and facilitate global trade, they also include training and technical assistance focused on border enforcement techniques and methods. In 2007, CBP conducted four related training missions, which trained 183 Jordanian Customs officials.

**The Road Ahead.** The USG expects continued strong cooperation with the Jordanian government in counternarcotics efforts and related issues.

# Lebanon

## I. Summary

Lebanon is not a major illicit drug producing or drug-transit country, but an apparent resurgence in the cultivation of hashish bears close monitoring. The Lebanese government reported increased but still not significant quantities of hashish and opium cultivation in 2007, and continues to act to prevent illicit drug cultivation and to eradicate illicit crops before harvest. In 2007, crop destruction operations were extremely hampered by the ongoing political crisis in Beirut and overstretched security commitments of the armed forces, which provide the security for drug enforcement police in the field. Also, illicit crop cultivation remains an attractive option for some farmers due to a difficult economic climate and a lack of economically viable alternate crops. There is practically no illicit drug refining in Lebanon, and minimal production, trading or transit of precursor chemicals. Drug trafficking across the Lebanese-Syrian border saw a slight increase in 2007, in part due to the security situation in the north where the Lebanese Army fought a three-month battle against Islamic militants and was not available for counternarcotics work during the summer hashish growing season. Also, there were isolated press reports of smuggling across the Lebanese-Israeli border. The Government of Lebanon (GOL) continued its ongoing drug demand reduction efforts through public service messages and awareness campaigns. Lebanon is a party to the 1988 UN Drug Convention.

## II. Status of Country

At least five types of drugs are available in Lebanon: hashish, heroin, cocaine, methamphetamine, and other synthetics, such as MDMA (Ecstasy). The use of hashish and heroin are reported to be on the rise. Small quantities of cocaine arrive in Lebanon to meet local demand, and the government reported increased abuse of synthetic drugs. Lebanon is not a major transit country for illicit drugs, and most trafficking is done by small-time dealers rather than major drug networks. Cannabis and opium derivatives are trafficked to a modest extent in the region, but there is no evidence that the illicit narcotics that transit Lebanon reach the U.S. in significant amounts. South American cocaine is smuggled into Lebanon primarily via air and sea routes from Europe, Jordan, and Syria, or directly to Lebanon. Lebanese nationals living in South America, in concert with resident Lebanese traffickers, often finance these operations. Synthetic drugs are smuggled into Lebanon primarily from Eastern Europe for sale to high-income recreational users.

The stagnating economic situation in rural Lebanon and the lack of effective investment in alternative crops continues to make illicit crop cultivation appealing to local farmers in the Bqaa Valley in eastern Lebanon, though in ever-lesser quantities due to efforts by the government to eradicate illicit crops. The government also continued a counternarcotics campaign to discourage new planting. There is no significant illicit drug refining in Lebanon. However, small amounts of precursor chemicals, shipped from Lebanon to Turkey via Syria, were thought to be diverted for illicit use in Lebanon. Legislation passed in 1998 authorized seizure of assets if a drug trafficking nexus is established in court proceedings.



### III. Country Actions Against Drugs in 2007

**Policy Initiatives.** The Ministry of Interior considers counter narcotics a priority. The government has continued vigorous campaign to discourage drug use by expanding public awareness on university campuses, through media campaigns and advertisements.

**Law Enforcement Efforts.** In 2007, the Government of Lebanon faced major hurdles in implementing its illicit crop eradication program. Statistics from the Judicial Police this year show that only 8,000 square meters of hashish were eradicated in 2007, fewer than in previous years, because the armed forces—which provide protection for the eradication program—were overstretched with other security commitments. Furthermore, some hashish farmers started to fight with the police and have threatened local tractor owners who are hired each year by the government to plow up the illegal crops. The police decided to halt the eradication program for fear it could provoke a popular uprising among the farmers against the government.

Lebanese law enforcement officers cooperated with foreign officials bilaterally and through Interpol in 2007. Several European and Persian Gulf countries have drug enforcement liaison offices in Beirut with which local law enforcement authorities cooperate. The UNODC and the UNDP gave the Government of Lebanon a \$362,000 grant for the years 2004 to 2006 to enable “the development and implementation of a national action plan on drug demand reduction.” The Internal Security Forces (ISF, Lebanon’s national police) stated that from January to October 2007 they arrested 1,251 people for drug use and 445 for dealing, distribution, and smuggling.

**Corruption.** Corruption remains endemic in Lebanon in all levels of government, but the U.S. is unaware that government corruption is systematically connected with drug production or trafficking or the protection of persons who deal in illicit drugs. The Government of Lebanon does not encourage or facilitate illicit production or distribution of controlled substances. While low-level corruption in the counter narcotics forces is possible, there is no evidence of wide-scale corruption within the Judiciary Police or the ISF, which appear to be genuinely dedicated to combating drugs. The parliament has yet to ratify the UN Convention against Corruption.

**Agreements and Treaties.** Lebanon is a party to the 1988 UN Drug Convention, the 1971 UN Convention on Psychotropic Substances, and the 1961 UN Single Convention, as amended by the 1972 Protocol. Lebanon also is a party to the UN Convention against Transnational Organized Crime and its protocols against migrant smuggling and trafficking in persons.

**Cultivation and Production.** Lebanon is no longer a significant drug producing country, but there has been an increase in hashish cultivation as many farmers appear to be resuming to plant illicit crops because they believe the crops will not be destroyed. In remote areas in the north where few other viable options exist, illicit crop production remains an attractive option. Lebanese police estimated that some 16,000 acres (6,500 hectares) of hashish and opium were planted this year in the fertile Bika’ valley. Due to the halt in the annual eradication program, only two percent of this hashish crop was destroyed, but early spring 2007 operations by counternarcotics police did result in 95 percent of the much smaller opium poppy crop being destroyed.

**Drug Flow/Transit.** Illicit drug trafficking via traditional smuggling routes was curtailed by joint Syrian-Lebanese operations through 2004, and the two sides have continued independent anti-trafficking operations since the Syrian withdrawal from Lebanese territory in 2005. Drug trafficking along the Israel-Lebanon frontier has been negligible since the Israeli withdrawal from Lebanon in May 2000 and the subsequent near-sealing of the UN-demarcated Blue Line. However, press reports indicate trafficking may have increased after the July-August 2006 war between Israel

and Lebanon. The primary route for smuggling hashish from Lebanon during 2007 was overland through Syria to Arab countries such as Saudi Arabia, Egypt, Kuwait, the United Arab Emirates, and via sea routes to Europe. According to the ISF, large exports of hashish from Lebanon to Europe are more and more difficult for smugglers due to increased seashore patrols and airport control.

**Domestic Programs (Demand Reduction).** Lebanese leaders understand that they need to address the problem of illicit drug use, but there is inadequate coordination between concerned ministries and NGOs. Since 2002 the government has sponsored public awareness campaigns to discourage drug use. Textbooks approved for public schools contain a chapter on narcotics awareness. The current law on drugs dictates that a National Council on Drugs (NCD) be established to provide substance abuse treatment, prevention, awareness, and a national action plan, but the NCD has not yet been formed.

There are several detoxification programs, but the only comprehensive rehabilitation program is Oum al-Nour (ON), a Beirut-based NGO funded in part by the Ministries of Social Affairs and Public Health. ON operates two drug treatment centers with a maximum capacity of 120 patients and offers a year-long residential program. In 2003, ON received a \$27,000 award from Bureau for International Narcotics and Law Enforcement Affairs, Department of State to furnish and equip a men's drugs rehabilitation center in Keserwan, Mount Lebanon. ON offers no outpatient programs but engages in prevention programs such as advertisements and education programs. There are several other organizations that provide prevention and treatment services. A drug rehabilitation center opened in Zahleh in 2005 run by the Saint Charles Hospital and the Ministry of Health, and can accommodate up to 16 men. An outpatient facility called Skoun that offers prevention, awareness, and counseling to drug users and their families opened in 2004 in downtown Beirut. From January through October 2006, Skoun enrolled 90 patients for treatment. The average age of the patients at Skoun in the past two years has been 29, with 36 percent between 20 and 25 years of age. Skoun is the first treatment center in the Middle East to prescribe buprenorphine maintenance for opiate addicts; after intense lobbying the Ministry of Health has started the legalization process for buprenorphine. Jeunesse Anti-Drogue (JAD) provides educational programs, medical treatment, and outpatient counseling. Jeunesse Contre la Drogue (JCD) raises awareness of substance abuse and AIDS. Association Justice et Misericorde (AJEM) was established to assist incarcerated drug abusers.

## IV. U.S. Policy Initiatives and Programs

**U.S. Policy Initiatives.** In meetings with Lebanese officials, U.S. officials continued to stress the need for diligence in preventing any return to the production and transportation of narcotics in Lebanon, and the need for a comprehensive development program for the Biqa' Valley that would provide impoverished residents with alternate sources of income. The USG also stressed the importance of anticorruption efforts.

**Bilateral Cooperation.** USAID continued its program to empower Lebanese government, media, and civil society to fight corruption and assisted U.S. and local NGOs to promote the substitution of illicit crops with legitimate, economically viable ones. The Sustainable Forage Development Program, ongoing since 2002, has proven the feasibility of forage cultivation as an alternative to illicit cropping, producing an average net income of \$950 per hectare. In FY 2007, 1,008 farmers in North Lebanon, Biqa' Valley, and South Lebanon cultivated forage crops on a total of 2,400

hectares. In 2007, the USCG provided engineering and maintenance, damage control, and leadership training to Lebanon.

**The Road Ahead.** The success of measures to halt cultivation and trafficking depends on the will of the Lebanese government. Since the withdrawal of Syrian forces in 2005, the Government of Lebanon has new access to areas of cultivation but it has not successfully developed a strategy of crop substitution. The USG will continue to press Lebanon to combat drug production and transit and implement anticorruption policies.

# Morocco

## I. Summary

The Government of Morocco (GOM) has achieved significant reductions in its cannabis and cannabis resin production in recent years, although it remains Morocco's primary drug problem. Advances in Morocco's counternarcotics efforts appear to be a function of the GOM's comprehensive counternarcotics strategy, which places emphasis on combining conventional law enforcement, crop eradication, and demand reduction efforts with economic development to erode the "cannabis growing culture" that exists in northern Morocco. The vast majority of cannabis produced in Morocco is consumed in Europe and has little, if any, impact on the U.S. market for illegal drugs. Morocco remains open to international assistance not only to combat cannabis smuggling, but also to confront the relatively nascent problem of trafficking and consumption of harder drugs, primarily cocaine, in Morocco. Morocco is a party to the 1988 UN Drug Convention.

## II. Status of Country

Although decreasing in recent years, the single greatest drug problem in Morocco is the large scale and endemic nature of cannabis cultivation and cannabis resin production. Morocco is the world's biggest producer of cannabis resin (hashish) and is consistently ranked among the world's largest producers of cannabis. Nonetheless, cannabis production in Morocco is falling. Cannabis production in Morocco, in 2005, was estimated at 53,400 metric tons (MT), down from 98,574 MT in 2004 due in part to aggressive GOM eradication efforts. Commensurately, gross cannabis resin production was down from 2,760 MT in 2004 to 1,067 MT in 2005, according to the GOM. Although overall statistics are not yet available for 2006, the GOM claims that production numbers for cannabis and cannabis resin are both projected to drop further below 2005 levels, testament to continuing GOM counter drug efforts. Cannabis remains primarily an export for Moroccan growers, with the vast majority of the product typically processed into cannabis resin or oil and exported predominately to Europe, and in relatively small quantities to Algeria, and Tunisia. Approximately 95 percent of cannabis and cannabis resin is consumed outside of Morocco, according to the GOM; and Morocco is the source of approximately 70 percent of all the hashish consumed in Europe, according to the UNODC's 2007 World Drug Report. Only very small amounts of cannabis and narcotics being produced in or transiting through Morocco reach the United States.

Although Morocco has made gains in reducing cannabis and cannabis resin production in recent years, long term efforts are stymied by the fact that the cannabis drug industry serves as means of livelihood for large segments of Morocco's population situated in the northern tip of the country between the Rif Mountains and the Mediterranean Sea, where cultivation is centered. Approximately 804,000 Moroccans (96,600 families and 75 percent of villages in that area) are involved in cannabis cultivation, according to the GOM. Still, Moroccan farmers benefit the least within the economic cycle of the drug trade. According to a 2005 UNODC report, while the illicit trade in Moroccan cannabis resin generates approximately \$13 billion a year in total revenues, only \$325 million goes to Moroccan farmers; the lion's share goes to traffickers. The center of cannabis production in Morocco continues to be the province of Chefchaouen, responsible for over 50 percent of cultivation with the four other surrounding provinces of Taunate, al-Hoceima, Tetouan, and Larache largely making up the rest of production; although smaller scale production also exists

in the Souss valley in southern Morocco. Although comparatively a much smaller problem, and virtually non-existent just a few years ago, Morocco is also combating the growth in trafficking and consumption of “harder drugs,” particularly cocaine. Although overall volumes of cocaine are difficult to estimate, increasing annual seizures serves as a useful proxy of the trend. Moroccan law enforcement authorities seized over 140 kilograms (kg) of cocaine in the first six months of 2007, up sharply from just over 45 kg in 2006 and 1.8 kg in 2005. Although cocaine remains cost prohibitive for most middle class Moroccans, falling prices are interesting increasing numbers of Moroccan buyers. A gram of cocaine that costs approximately \$130 in 2004 now sells for approximately \$70, according to press reports. The fall in prices corresponds with the increased amount of the drug being smuggled through the territory and the arrival of increasing numbers of South American drug smugglers in Morocco, according to the GOM. Police anecdotally report the arrest since 2005 of several South American pilots, making smuggling flights between Morocco to Spain.

Heroin and psychotropic drugs (methamphetamine, Ecstasy, etc.) are also making inroads into the country but to a lesser extent than cocaine. To date, Morocco has no known enterprises that use dual-use precursor chemicals and neither serves as a known source nor transit point for them.

### III. Country Actions Against Drugs in 2007

**Policy Initiatives.** According to the GOM, long term amelioration of the drug problem is only feasible if traditional interdiction, eradication, and demand reduction methods (the last of which being considered mainly a European issue) are augmented by an emphasis on a broader economic development approach, given the historical economic dependence on cannabis in the north. In order to break the vicious cycle of the “cannabis-growing culture” in Morocco’s Northern provinces, the GOM has emphasized crop substitution, anti-corruption efforts and economic development.

**Law Enforcement Efforts.** According to government statistics in 2005, Morocco seized 116 MT of cannabis, down from the previous year’s total of 318 MT. Cannabis resin seizures were also down, but both reductions can be directly tied to successful crop eradication efforts in Morocco, according to the UNODC 2007 World Drug Report. Seizures, however, were up for cocaine, heroin, and psychoactive drugs during the same period. Since 1995, the GOM reports it has deployed up to 10,000 police personnel into the North and Rif mountains to interdict drug shipments and to maintain counternarcotics checkpoints, rotating personnel approximately every six months. Moroccan forces also staff observation posts along the Mediterranean coast, and the Moroccan Navy carries out routine sea patrols and responds to information developed by the observation posts. In 2007, Morocco reports it arrested 18,734 Moroccans and 255 foreigners in connection with drug-related offenses. Arrests of departing traffickers at the ports, and at Casablanca airport of arriving cocaine “mules” from Sub-Saharan Africa, are frequently in the news. Morocco law provides a maximum allowable prison sentence for drug offenses of 30 years, as well as fines for illegal drug violations ranging from \$20,000-\$80,000. Ten to fifteen years imprisonment remains the typical sentence for major drug traffickers convicted in Morocco. In 2004, Morocco and France agreed to reinforce bilateral counternarcotics cooperation by deploying liaison officers to Tangiers and Paris. According to both Moroccan and French police sources, controlled deliveries of drugs have proven to be a very successful interdiction technique as a result of that joint initiative.

**Corruption.** As a matter of government policy, the GOM does not encourage or facilitate illicit production or distribution of narcotic or psychotropic drugs or other controlled substances, or the

laundering of proceeds from illegal drug transactions. These actions are illegal and the government tries to enforce these laws to the best of its ability. In September 2006, a GOM investigation into the network of a major drug baron resulted in the arrest of more than a dozen high-ranking governmental, judicial, military, and law enforcement officials linked to narcotics-related corruption, including a senior security official and former chief of police in Tangiers. This investigation, as part of a larger government effort to combat corruption, led to further high-level shake ups in the law enforcement community, as well as the detention of other alleged drug traffickers. Although this legal process continues, there has not been the same level of significant arrests/actions against senior corrupt officials this year, although some mid-level officials were arrested.

**Agreements and Treaties.** Morocco is a party to the 1988 UN Drug Convention, the 1971 UN Convention on Psychotropic Substances and the 1961 UN Single Convention as amended by the 1972 Protocol. Morocco is a party to the UN Convention against Transnational Organized Crime. Morocco and the United States cooperate in law enforcement matters under an MLAT. Morocco is a party to the UN Convention against Corruption.

**Cultivation/Production/Eradiation Efforts.** Morocco succeeded in decreasing the land dedicated to cannabis cultivation from 134,000 hectares in 2003 to 76,400 hectares in 2005, due in part to an aggressive eradication campaign, carried out mainly by Gendarmerie and local authorities, according to 2007 UNODC report. GOM eradication efforts in 2005 destroyed more than 7,000 hectares of cannabis, primarily in Larache and Taounate Provinces. Although the final results for 2006 eradication efforts are not in, the GOM claims that the figure for total land under cannabis cultivation will be lower for 2006 than it was for 2005. There is no indication of renewed cultivation in areas from which it was eradicated.

In 2003, the GOM began partnering with UNODC in conducting cannabis surveys in order to compile accurate data on illegal drug production to better define and address the problem. Throughout the 1980's, the GOM worked in conjunction with the UN to devise a response to the unique geographic, cultural and economic circumstances that confront the many people involved in the cultivation of cannabis in northern Morocco. Some of these projects have included encouraging cannabis farmers to cultivate alternative agricultural products and switching to such commercial alternatives as dairy farming, apple growing, and bee-keeping. Moroccan drug officials, however, readily admit that crop substitution programs are often a "hard sell" to farmers, who can earn eighteen times the earnings of a substitute crop such as barley by continuing to grow cannabis, according to the GOM's 2006 counter drug strategy report.

In 2004, Morocco launched an awareness campaign for cannabis growers alerting them to the environmental dangers of cannabis cultivation to include soil exhaustion, excessive fertilizer concentrations, and deforestation and informing them of alternatives to use the land more productively. The GOM selected the northern province of Taounate last year as the site for the construction of the National Institute of Medicinal and Aromatic Plants to study the viability of medicinal crop substitution.

Since the 1990's, the GOM continued to emphasize economic development in Morocco's northern provinces through the work of Agence pour la development des Provinces du nord (APDN) and the Tangier Mediterranean Special Agency (TMSA), which have made infrastructure improvement efforts such as improving roads, modernizing irrigation networks, and establishing health and veterinary clinics. In June 2003, TMSA oversaw the groundbreaking of the centerpiece of its

northern development program, the Tanger-MED port, which is set to become Morocco's primary maritime gateway to the world.

**Drug Flow/Transit.** Given its proximity to Morocco, Spain is a key transfer point for Europe-bound Moroccan cannabis resin. Due to the Schengen zone, once contraband reaches Spain, it can normally be transshipped to most other Western European destinations much easier than in the past. The contraband is transported mainly via maritime and overland routes from northern Morocco, according to the GOM. The primary ports of export for Moroccan cannabis are Oued Lalou, Martil and Bou Ahmed on the Mediterranean coast. Most large shipments of illicit cannabis bound for Spain travel via speedboats, which can make the roundtrip to Spain in one hour or less, although fishing boats, yachts, and other vessels are also used. Drug shipments of up to two metric tons have been seized on speed boats.

Smugglers also continue to transport cannabis via truck and car through the Spanish enclaves of Ceuta and Melilla, known to have lower inspection standards than the rest of the European Union, and the Moroccan port of Tangiers, crossing the Straits of Gibraltar by ferry. According to the UNODC, Spain consistently accounts for the world's largest portion of cannabis resin seizures (52 percent of global seizures in 2005). The Moroccan press reported that some 800 MT of cannabis resin smuggled from Morocco was seized in Spain in 2004. Spain's deployment of a network of fixed and modular radar, infrared, and video sensors around the Straits of Gibraltar, starting in 1999 and known as the Integrated System of External Vigilance (SIVE), has forced Moroccan smugglers to take longer and more vulnerable routes.

Latin American drug organizations have begun in recent years to exploit Morocco's well-established cannabis routes to smuggle cannabis and, increasingly, cocaine into Europe. Although the main African redistribution centers for cocaine from Latin America remain sub-Saharan—including Ghana and Nigeria—Morocco is increasingly being used as a transit country from Latin America to Europe in a trend that can be expected to continue.

**Domestic Programs/Demand Reduction.** The GOM is concerned about signs of an increase in domestic cocaine and heroin use, but does not aggressively promote reduction in domestic demand for these drugs or for cannabis. Some press estimates suggest that as many as ten percent of adults have regularly used cannabis in the past year. Morocco has established a program to train the staffs of psychiatric hospitals in the treatment of drug addiction. In partnership with UNODC, the Ministry of Health is exploring the relationship between drug use and HIV/AIDS infection in Morocco. Moroccan civil society and some schools are active in promoting counternarcotics use campaigns.

#### IV. U.S. Policy Initiatives and Programs

**Bilateral Cooperation.** The USG is working to enhance Morocco's counternarcotics capability through training in law enforcement techniques, and to promote the GOM's adherence to its obligations under relevant bilateral and international narcotics control agreements. U.S.-supported efforts to strengthen anti-money laundering laws and efforts against terrorist financing may also contribute to the GOM's ability to monitor the flow of money from the cannabis trade. According to Moroccan narcotics officials, USG-provided border security equipment, particularly new scanners in main ports, improved the effectiveness of security measures at entry points, which directly contributed to increased drug seizures in 2004. The Department of Homeland Security through U.S. Customs and Border Protection has provided Targeting and Risk Management and International Air Cargo Interdiction Training. Morocco and the U.S. have also begun to expand

cooperation on drug investigations of mutual interest. The U.S. DEA, which covers Morocco from its Paris office, has enhanced its engagement with the Moroccan National Police, including discussing ways to increase training visits to the U.S. by Moroccan counternarcotics officials and by U.S. officials to Morocco. In September 2005, the U.S. Coast Guard sent a Mobile Training Team to provide training in maritime law enforcement boarding procedures. More recently, in 2007, the U.S. Coast Guard dispatched two Mobile Training Teams to conduct Maritime Safety & Environmental Protection, and Advanced Boarding Officer courses.

**Road Ahead.** The endemic nature of the cannabis culture in Morocco will only be ameliorated through incremental application of Morocco's comprehensive counternarcotics strategy, which along with traditional eradication, law enforcement, and demand reduction efforts, places emphasis on economic development, which will require a time to take hold, and bring about change. The U.S. will continue to monitor the illegal drug situation in Morocco, cooperate with the GOM in its counternarcotics efforts, and together with the EU, provide law enforcement training, intelligence, and other support for the foreseeable future.



# Mozambique

## I. Summary

Mozambique is a transit country for illegal drugs such as hashish, herbal cannabis, cocaine, and heroin consumed primarily in Europe, and for mandrax (methaqualone) consumed primarily in South Africa. Some illicit drug shipments passing through Mozambique may also find their way to the United States and Canada. Drug production mostly is limited to herbal cannabis cultivation and a small but growing number of mandrax laboratories. Evidence suggests considerable use of herbal cannabis and limited consumption of “club drugs” (Ecstasy/MDMA), prescription medicines, and heroin primarily by the country’s urban population. Porous borders, a poorly policed seacoast, inadequately trained and equipped law enforcement agencies, and corruption in the police and judiciary hampered Mozambique’s enforcement and interdiction efforts. The United States, the UN Office on Drugs and Crime (UNODC), and other donors have established cooperation programs to improve training of drug control officials and provide better interdiction and laboratory equipment. Mozambique is a party to the 1988 UN Drug Convention.

## II. Status of Country

Mozambique is not a significant producer of illegal drugs and not a producer of precursor chemicals. Herbal cannabis remains the most produced and most consumed drug in the country. While herbal cannabis for local consumption is produced throughout the country, seizure quantities and statistics from 2006 indicate higher levels in Maputo City, Manica, Sofala, and Cabo Delgado provinces. Limited amounts are trafficked to neighboring countries, primarily South Africa. Mozambique’s role as a transit country for illicit drugs and precursors and a favored point of disembarkation in Africa for trafficking to Europe continues to grow, mostly because of its proximity to South Africa (the major market for illicit drugs) as well as weak law enforcement capacity at borders, major seaports, and airports. Southwest Asian producers ship cannabis resin (hashish) and synthetic drugs through Mozambique to Europe and South Africa. Limited quantities of these shipments also may reach the United States and Canada. Heroin and other opiate derivatives shipped through Mozambique usually originate in Southeast Asia and typically transit India, Pakistan, the United Arab Emirates, and later Tanzania, before arriving by small ship or, occasionally, overland to Mozambique. Many traffickers are of Tanzanian or Pakistani origin. In 2007, there were fewer reports of cocaine entering the country via couriers on international flights from Colombia and Brazil. Government authorities attribute the decrease to a change in tactics by traffickers and, to a lesser extent, more stringent police efforts at airports. However, they also acknowledge that fewer reports may not represent a decrease in the overall amount of cocaine entering the country.

Government authorities have noted an increase in the use of heroin and Ecstasy among the urban population. The abuse of mandrax, which is usually smoked in combination with cannabis, continues to be a matter of concern for countries in southern Africa. Shipments of mandrax also enter South Africa from India and China, sometimes after transiting Mozambique. As of 2007, the country has dropped visa requirements for citizens of all six neighboring countries, further complicating interdiction and enforcement efforts.

### III. Country Actions Against Drugs in 2007

**Policy Initiatives.** Mozambique's accomplishments in meeting its goals under the 1988 UN Drug Convention remain limited. Government resources devoted to the counternarcotics effort are meager, and little or no donor funds have been available in recent years. The Mozambican government carries out drug education programs in local schools in cooperation with bilateral and multilateral donors as part of its demand reduction efforts.

**Law Enforcement Efforts.** Mozambique's counternarcotics brigade operates in Maputo and reports to the Chief of the Criminal Investigation Police in the Ministry of Interior. The brigade suffers from a general lack of resources and is operating at reduced levels compared with previous years. The brigade has not received training for several years. Since 2005, a small, specialized police unit designed to strengthen efforts to fight organized crime, including narcotics trafficking, has operated at airports in provincial capitals. In 2006 Mozambican and Brazilian authorities signed a memorandum of understanding on principles, in preparation for an eventual extradition agreement for those convicted of trafficking drugs between the two countries. From January to June 2007, Mozambican authorities seized 900 kg of cannabis, 12 tons of hashish, 1958 mandrax pills, and 3000 kg of cocaine. As interdiction efforts improve at the Maputo airport, traffickers have used alternate airports, including those of Beira, Nampula, Quelimane and Vilankulos. Police reported that in 2006 50 Mozambican and foreign nationals were arrested, of which 20 were tried, and 7 convicted of drug trafficking. On several occasions during the year, Mozambican authorities highlighted a severe lack of resources for destroying seized drugs, particularly hashish, cannabis, and cocaine.

**Corruption.** The government does not as a matter of policy encourage or facilitate the illicit production or distribution of narcotics, psychotropic drugs, other controlled substances, or the laundering of proceeds from illegal drug transactions, nor were there reports in 2007 that any senior government official was engaged in such practices. While corruption is pervasive in Mozambique, the government has continued efforts to prosecute police and customs officials charged with drug trafficking offenses.

**Agreements and Treaties.** Mozambique is a party to the 1961 UN Single Convention on Narcotic Drugs, as amended by the 1972 Protocol, the 1971 UN Convention on Psychotropic Substances, the 1988 UN Drug Convention, and the UN Convention against Transnational Organized Crime. Mozambique has signed, but not yet ratified the UN Convention Against Corruption.

**Cultivation/Production.** Cannabis is cultivated primarily in Maputo City, Manica, Sofala, and Cabo Delgado provinces. Intercropping is the most common method of production. The Mozambican government has no reliable estimates of crop size. Authorities have made efforts in 2007 to eradicate cannabis crops through controlled burns.

**Drug Flow/Transit.** Assessments of drugs transiting Mozambique are based upon limited seizure data and the observations of Mozambique officials and UNODC officials. Mozambique increasingly serves as a transit country for hashish, cannabis resin, heroin, and mandrax originating in Southwest Asia, owing to its porous borders, long and un-patrolled coastline, lack of resources for interdiction efforts, and improving transportation links with neighboring countries. Drugs destined for the South African and European markets arrive in Mozambique by small ship, mostly in the coastal provinces of Cabo Delgado, Nampula, Sofala, and Inhambane, before being repackaged and sent by land to neighboring countries.

The Maputo corridor border crossing at Ressano Garcia/Lebombo is an important transit point to South Africa. Hashish and heroin are also shipped on to Europe, and some hashish may reach Canada and the United States, but not in significant quantities. Arrests in Brazil, Mozambique, and South Africa indicate drug couriers trafficked cocaine from Colombia and Brazil to Mozambique, often through Lisbon, for onward shipment to South Africa. In addition, Nigerian and Tanzanian cocaine traffickers have targeted Mozambique as a gateway to the South African and European markets.

**Domestic Program/Demand Reduction.** The primary substances of abuse are alcohol, nicotine, and herbal cannabis. The Mozambican Office for the Prevention and Fight Against Drugs (GCPCD) reported in 2007 that the use of heroin, cocaine, and psychotropic “club drugs,” such as Ecstasy and mandrax, was increasing in Mozambique’s urban population. GCPCD maintains an office in each provincial capital and coordinates a drug prevention and education program for use in schools and with high risk families; the program includes plays and lectures in schools, churches, and other places where youths gather. It has also provided the material to a number of local NGOs for use in their drug education programs. GCPCD received no treatment assistance from bilateral donors in 2007. Despite an increase in the number of drug users, government funding and resources are scarce (the GCPCD operated on a budget of approximately \$45,000 in 2007), limiting abuse and treatment options. The Ministry of Health does not have a specific program to assist drug abusers; those seeking assistance are referred to the Psychiatric Hospital.

#### IV. U.S. Policy Initiatives and Programs

**Bilateral Cooperation.** The United States continues to sponsor Mozambican law enforcement officials and prosecutors to attend regional training programs at the International Law Enforcement Academy (ILEA) for Africa in Botswana. Law enforcement officials have also received training at ILEA in New Mexico. The United States has supported the police sciences academy near Maputo, through training and technical assistance in the areas of drug identification and investigation, as well as other areas of criminal sciences including fingerprint identification, forensic photography, and the identification of fraudulent documents. The assistance included construction of a forensic laboratory and the supply of related forensic analysis equipment. Additionally, technical assistance programs at the police academy also focus on methods to foster better relations between the community and the police. USAID provides training support to the Attorney General’s Central Office for the Combat of Corruption (GCCC), formerly the anticorruption unit. In October 2007, an assessment team from the State Department’s Office of Anti-Terrorism Assistance conducted an assessment to consider appropriate assistance levels for improving the capabilities of Mozambican security forces to combat terrorism. Part of this assessment included an evaluation of security capabilities at the land border station at Ressano Garcia, the Maputo seaport, and Maputo’s international airport. Also, the USG provided training to guards and senior officers of the Mozambican Border Guards in techniques of securing borders, managing border crossing (document checking, inspections) at two different locations within Mozambique. Advanced training is scheduled to take place in December.

**The Road Ahead.** U.S. assistance in support of the GCCC will continue in 2007. In October a short-term regional legal advisor arrived to work with the unit and other judicial offices for a period of several months through the Department of Justice Overseas Prosecutorial Development Assistance and Training program. Additionally, efforts to improve Mozambique’s border security capabilities continue. Building on the success of the initial training, the USG will sponsor additional basic and advanced border security courses for Mozambican border guards. Inspection

materials, vehicles and alternate transportation options, equipment for distant posts, and computer equipment will also be supplied to border guards to assist in putting into practice the techniques taught in the training courses. The U.S. military has also provided shallow draft vessels for limited coastal security work in conjunction with USCG training on ship/vessel boarding and search and seizure techniques. The GRM would benefit from increased funding for counternarcotics and drug treatment efforts and should continue its focus on reducing corruption to ensure that progress with its narcotics control efforts continues.

# Namibia

## I. Summary

While occasionally used as a drug transit point, Namibia is not a major drug producer or exporter. Nevertheless, statistics for 2007 showed a marked increase in illegal drug seizures compared to previous years, with approximately \$370,000 worth of drugs (870 kilograms of marijuana, plus extremely small quantities of Mandrax (methaqualone), cocaine, and Ecstasy) seized between April 2006 and March 2007. Drug abuse remains an issue of concern, especially among economically disadvantaged groups. Narcotics enforcement is the responsibility of the Namibian Police's Drug Law Enforcement Unit (DLEU), which lacks the manpower, resources and equipment required to fully address the domestic drug trade and transshipment issues. Namibia is not a party to the 1988 UN Drug Convention.

## II. Status of Country

Namibia is not a significant producer of drugs or precursor chemicals. No drug production facilities were discovered in Namibia in 2007.

## III. Country Actions Against Drugs in 2007

**Policy Initiatives.** Namibia has requested United Nations (UNODC) assistance in completing a National Drug Master Plan. While Namibia has not said precisely when it will become a party to the 1988 UN Drug Convention, many Convention requirements are already reflected in Namibian law, which criminalizes cultivation, production, distribution, sale, transport and financing of illicit narcotics. Namibia's Parliament passed the Prevention of Organized Crime Act (POCA), designed to combat organized crime and money laundering, in 2004, and the Government intends to issue regulations and place POCA into effect in early 2008. In July 2007, Parliament passed the Financial Intelligence Act (FIA) and the Government intends to issue regulations and place FIA into effect also in early 2008. The Combating of the Abuse of Drugs Bill was tabled in Parliament in 2006. If passed, it would ban the consumption, trafficking, sale and possession of dangerous, undesirable and dependence-inducing substances. Namibia is also a signatory to the International Convention for the Suppression of the Financing of Terrorism. The Namibian Anti-Terrorism Activities Bill and Drugs Control Bill are still under consideration. Once fully implemented and harmonized, the new legislation will allow for asset forfeiture and other narcotics-related prosecution tools.

**Law Enforcement Efforts.** Namibia fully participates in regional law enforcement cooperation efforts against narcotics trafficking, especially through the Southern African Development Community (SADC) and the Southern African Regional Police Chiefs' Cooperative Organization (SARPCCO). The Minister of Safety and Security and working level officials meet regularly with counterparts from neighboring countries to discuss efforts to combat cross border contraband shipments (including narcotics trafficking). In November 2007, Namibian Police seized 544 kilograms of cannabis, the largest single seizure in Namibian history.

**Corruption.** As a matter of government policy, the Government of Namibia does not encourage or facilitate illicit production or distribution of narcotic or psychotropic drugs or other controlled

substances, or the laundering of proceeds from illegal drug transactions. Similarly, no senior government official is alleged to have participated in such activities.

**Agreements and Treaties.** Namibia is not a party to the 1988 UN Drug Convention; however, it is a party to the 1961 UN Single Convention as amended by the 1972 Protocol, and the 1971 UN Convention on Psychotropic Substances. Namibia also is a party to the UN Convention Against Transnational Organized Crime and its protocols against migrant smuggling and trafficking in persons, and to the UN Convention against Corruption. The United States and Namibia do not have a bi-lateral extradition or mutual legal assistance treaty. In 2006, however, Namibia designated the United States as a country to which Namibia could extradite persons, and there is a pending extradition case. In addition, there has been excellent cooperation regarding legal assistance between both countries.

**Drug Flow/Transit.** Namibia's excellent port facilities and road network, combined with weak border enforcement, make it a likely transshipment point for drugs en route to the larger and more lucrative South African market. DLEU (Drug Law Enforcement Unit) personnel believe much of the transshipment takes place via shipping containers either offloaded at the port of Walvis Bay or entering overland from Angola and transported via truck to Botswana, Zambia and South Africa. Inadequate staffing and training, inadequate screening equipment, and varying levels of motivation among working-level customs and immigration officers at Namibia's land border posts all prevent adequate container inspection and interception of contraband. Inconsistently applied immigration controls also make Namibia an attractive transit point for Africans en route to or from Latin America for illicit purposes. The current maritime security posture does not allow the Namibian police, naval, and port authorities to monitor maritime activities outside the 5 km outer anchorage area of Namibia's major ports in Walvis Bay and Luderitz. It has been reported that drug traffickers have been able to exploit this weakness by using small crafts to meet larger vessels outside these controlled areas. The Namibian Navy assists the police and customs officials with better patrolling of Namibia's Exclusive Economic Zones (EEZs) and expects to have a mission capable fleet by mid-2008.

**Domestic Programs/Demand Reduction.** Drug treatment programs are available from private clinics, and to a lesser extent from public facilities. The vast majority of treatment cases in Namibia are for alcohol abuse, with the remainder divided evenly between cannabis and Mandrax (methaqualone). There is also increasing evidence of the problem of cocaine use in Namibia.

## IV. U.S. Policy Initiatives and Programs

**Policy Initiatives.** The USG continues to support Namibian participation in law enforcement training programs at the International Law Enforcement Academy (ILEA) in Gaborone, Botswana. Most of these training programs include counternarcotics modules. Representatives of several Namibian law enforcement agencies (Customs and Border Protection, Immigration and Customs Enforcement, Prison Service, the Namibian Police, and the Anti-Corruption Commission) and prosecutors have participated in ILEA training. The police have repeatedly stated their willingness to cooperate with the USG on any future narcotics-related investigations. The U.S. Department of the Treasury is assisting Namibia with the establishment and development of the Financial Intelligence Center to fully implement the Financial Intelligence Act.

**The Road Ahead.** The USG will continue to coordinate with relevant law enforcement bodies to allow them to take advantage of training opportunities at ILEA Botswana and elsewhere, and will assist the Government of Namibia in any narcotics investigation with a U.S. nexus.

# Nigeria

## I. Summary

Nigeria remains a hub of narcotics trafficking and money laundering activity and Nigeria is still ranked as one of the world's most corrupt countries. Nigerian criminal organizations dominate the African drug trade and transport narcotics to markets in the United States, Europe, Asia, and other parts of Africa. Some of these organizations are also engaged in advance-fee fraud, commonly referred to in Nigeria as "419 Fraud" after a formerly relevant section of the Criminal Code of Nigeria, and other forms of fraud against U.S. citizens and businesses as well as citizens and businesses of other countries. Serious under/unemployment has been a major problem for Nigeria in civilian governments and military governments alike. Abysmal economic conditions for the vast majority of Nigerians contribute significantly to the continuation and expansion of drug trafficking, widespread corruption and other criminal acts in Nigeria. These factors, combined with Nigeria's central location along the major trafficking routes and access to global narcotics markets have provided both an incentive and mechanism for criminal groups to flourish.

Heroin from Southeast and Southwest Asia, smuggled via Nigeria, accounts for a significant portion of the heroin reaching the United States. Nigerian criminal elements, operating in South America, transship cocaine through Nigeria to Europe, Asia, and Africa. South Africa is a major destination for Nigerian-trafficked cocaine within Africa. Nigerian-grown marijuana is exported to neighboring West African countries and to Europe, but not in significant quantities to the United States. Aside from marijuana, Nigeria does not produce any of the drugs that its nationals traffic. Nigeria is a party to the 1988 UN Drug Convention.

## II. Status of Country

Nigeria does not produce precursor chemicals or drugs that have a significant effect on the United States, but Nigeria is fully entrenched as a major drug-transit country. In addition, Nigerian criminal elements operate global trafficking/criminal networks, moving cocaine and heroin to major developed country markets.

Nigerian drug organizations are heavily involved in corollary criminal activities to their prime illicit "business" of drugs. These include document fabrication, illegal immigration, and financial fraud. Their ties to criminals in the United States, Europe, South America, Asia, and South Africa are well documented. Nigerian poly-crime organizations exact significant financial and societal costs, especially among West African states with limited resources for countering these organizations.

The National Drug Law Enforcement Agency (NDLEA) is the law enforcement agency with sole responsibility for combating narcotics trafficking and drug abuse in Nigeria. In 2007, the NDLEA enjoyed successes in securing more resources from the Nigerian national budget, but is still underfunded. The Agency received a total sum of N26.824M (ca. \$220,000 for administrative expenses and N357M (ca. \$3 million) for salaries and benefits (\$1 U.S. dollar = 118.60 Nigerian Naira). No funds were released for capital projects.

All law enforcement agencies suffered a loss of focus while the country concentrated on local, state and national elections in April 2007. Cooperation among Nigeria's law enforcement agencies still leaves much to be desired. Although all law enforcement elements are represented at Nigeria's

international airports and at its seaports, joint operations between them are virtually non-existent. A missing ingredient partially explaining the dearth of apprehensions of major traffickers or the absence of consistent interdiction of major shipments of contraband is interagency cooperation. No single law enforcement agency in Nigeria has adequate resources to combat the increasingly sophisticated international criminal networks that operate in and through the country itself; inter-agency cooperation is necessary for success.

### III. Country Actions Against Drugs in 2007

**Policy Initiatives.** Nigeria's counternarcotics policy is based on the National Drug Control Master Plan (NDCMP), which has been in place since 1998. This plan assigns responsibilities to various government ministries and agencies as well as NGOs and other interest groups. In addition, the Master Plan outlines basic resource requirements and timeframes for the completion of objectives. Many of these goals are still unfulfilled.

NDLEA has 46 field operational commands, seven (7) established Directorates and nine (9) autonomous Units and offices that work together to carry out the drug control mandate of the Agency. Additionally, the recent computerization of the Agency's administrative and accounting statistics ensures greater efficiency and transparency than in the past.

**Law Enforcement Efforts.** Established in 1989, the NDLEA works alongside Nigerian Customs, the State Security Service, the National Agency for Food and Drug Administration and Control (NAFDAC), the Nigerian Police Force (NPF), and the Nigerian Immigration Service at various ports of entry and throughout the country. The NDLEA's most successful interdictions have taken place at Nigeria's international airports, with the majority of hard drug seizures (e.g., cocaine and heroin) at Lagos Murtala Mohammed International Airport. Increasing numbers of drug couriers are being apprehended at Abuja International Airport. The agency has successfully apprehended individual drug couriers transiting these airports, but only a few of the major drug traffickers sponsoring these couriers. Efforts similar to the vigorous inspections conducted at Lagos and Abuja international airports are also needed at Nigeria's five major seaports as smugglers change their tactics to avoid detection. NDLEA also emphasizes a public campaign focused on destroying the annual marijuana crop throughout the country.

Between January and September 2007, Nigerian law enforcement apprehended 3440 narcotics law violator suspects and seized a total of 46,487 kg of various types of illicit drugs summarized thus: Cannabis—45,937 kg; Cocaine—259.2 kg; Heroin—85.9 kg; and Psychotropic substances—204.5 kg. Indeed, a single seizure of 62.4 kg of heroin at Kano Airport sent from Pakistan in April 2007 is a strong indication that heroin still remains a serious threat to the country. More vigilance is required not only to prevent the importation of cocaine through the borders but also to prevent the importation of heroin through the airports.

Attempts by the NDLEA to arrest and prosecute major traffickers and their associates often fail in Nigeria's courts, which are subject to intimidation and corruption. Asset seizures from narcotics traffickers and money launderers, while permitted under Nigerian law, have never been systematically utilized as an enforcement tool, but some convicted traffickers have had their assets forfeited over the years. The number of major traffickers penalized remains small. NDLEA has requested that the National Assembly amend the narcotics law to provide a more strict and effective punishment for major traffickers with the minimum sentence being a 5-year jail term and no option of a fine, plus provision for the seizure of a foreign offender's passport.



Drug-related prosecutions have continued at a steady pace. Special drug courts and a more energetic approach by the NDLEA to prosecute drug traffickers efficiently and successfully have been put in place.

The NDLEA has assumed a leadership role in drug enforcement in the region. With DEA assistance, the NDLEA created the West African Joint Operation (WAJO) initiative, bringing together drug enforcement personnel from 15 countries in the region to improve regional cooperation. DEA-assisted WAJO planning conferences have continued to be held successfully. The NDLEA continues expanded counternarcotics cooperation with the police in South Africa, where Nigerian criminal organizations are believed to be responsible for the bulk of drug trafficking.

**Corruption.** Corruption has for many years, permeated Nigerian society and continues to be a systemic problem in Nigeria's government. Unemployment is very high and civil servants' salaries are low. In addition, actual payment of salaries is frequently months in arrears, compounding the corruption problem. To combat corruption in Nigerian society, the Nigerian Government established the Independent Corrupt Practices and Other Related Offences Commission (ICPC), through the Corrupt Practices and other Related Offences Act of 2000. The Act prohibits corrupt practices and other related offences, and also provides for punishment for those offenses. Recent high profile investigations and arrests have resulted in cabinet level officials being charged, dismissed from their post and incarcerated while awaiting hearings on corruption charges. None of these actions were for drug-related offenses. USG technical assistance funded through State/INL and implemented by the U.S. Department of Justice has continued providing the ICPC with additional training and technical assistance, including a Resident Legal Advisor (RLA) to improve enforcement against corruption. Neither Nigerian policy nor any senior government officials are known to encourage or facilitate the illicit production or distribution of illegal substances or the laundering of proceeds from illegal drug transactions.

**Agreements and Treaties.** Nigeria is a party to the 1988 UN Drug Convention, the 1961 UN Single Convention on Narcotic Drugs, as amended by the 1972 Protocol, and the 1971 UN Convention on Psychotropic Substances. Nigeria has signed the UN Convention against Transnational Organized Crime, the Protocol against Trafficking in Persons, the Protocol against Smuggling of Migrants, and the Protocol Against Trafficking in Illegal Firearms. The 1931 U.S.-UK Extradition Treaty, which was made applicable to Nigeria in 1935, is the legal basis for U.S. extradition requests. The United States and Nigeria also have a Mutual Legal Assistance Treaty (MLAT), which entered into force on January 14, 2003.

The Government of Nigeria continues to work on a mechanism to process U.S. extradition requests expeditiously while observing due process under Nigerian law. Currently, a dedicated prosecutorial team handles all U.S. extradition cases before a specifically designated High Court judge. Nigerian law still affords the defendant many options to delay/confuse proceedings, especially interlocutory objection proceedings, which allow defendants to raise objections that are litigated first before the main case can proceed. There is one case pending extradition since 2004.

**Cultivation/Production.** Cannabis is the only illicit drug produced in any large quantities in Nigeria, and it is cultivated in all 36 states. Major cultivation takes place in central and northern Nigeria and in Delta and Ondo states in the south. Marijuana, or "Indian Hemp" as it is known locally, is sold in Nigeria and exported throughout West Africa and into Europe. To date, there is no evidence of significant marijuana imports from Nigeria into the United States. The NDLEA has continued to pursue an aggressive eradication campaign.

**Drug Flow/Transit.** Nigeria is a major staging point for Southeast and Southwest Asian heroin smuggled to Europe and the United States and for South American cocaine trafficked to Europe. While Nigeria remains Africa's drug transit hub, there are indications that the preferred methods of trans-shipment have changed. The NDLEA unit at Lagos' Murtala Mohammed International Airport conducts select searches of passengers and carry-on baggage. But they do not conduct 100 percent searches. This is extremely significant given the addition of DELTA Airlines direct flights to the U.S. from Lagos that started in December 2007. Nevertheless, the enhanced security posture at this airport has prompted some drug traffickers to use Nigerian seaports, concealing large quantities of contraband in shipping containers. They also seemed to have moved to other West African airports and seaports with even less stringent security controls.

**Domestic Programs/Demand Reduction.** Local production and use of marijuana have been a problem in Nigeria for some time; however, according to the NDLEA and NGOs, the abuse of harder drugs (e.g., cocaine, heroin) seems to be on the rise. Heroin and cocaine are readily available in many of Nigeria's larger cities. (Note: Since there is no formal tracking system or statistical evidence available, the actual extent of domestic drug abuse in Nigeria is unclear.) The NDLEA continues to expand its counternarcotics clubs at Nigerian universities and distribute counternarcotics literature. The NDLEA also has instituted a teacher's manual for primary and secondary schools, which offers guidance on teaching students about drug abuse. NDLEA sponsored a nationwide contest between primary and secondary schools with public presentations held at the "UN Day Against Drugs" ceremony in 2007. Sophisticated drug treatment is only available from a few private clinics in Nigeria's major cities.

#### IV. U.S. Policy Initiatives and Programs

**Policy Initiatives.** U.S.-Nigerian counternarcotics cooperation focuses on interdiction efforts at major international entry points and on enhancing the professionalism of the NDLEA and other law enforcement agencies. The DEA country office in Nigeria works with the NDLEA Joint Task Force and other operations personnel to help train, coordinate, plan and implement internal and regional interdiction operations. At all levels, USG representatives enjoy excellent access to their counterparts and there is an evident desire on both sides to strengthen these relationships. One option for a high-level law enforcement dialogue, which is being explored is a renewal of the U.S.-Nigeria Law Enforcement Working Group which used to meet annually, with each nation alternating as host in its capital. The last meeting of the Group was in 2004.

**The Road Ahead.** Federal funding for Nigerian law enforcement agencies and key anticrime agencies remains insufficient and erratic in disbursement. This affects the planning and consistency of actions on the part of these agencies, giving the impression of lack of commitment and ineffectiveness. Unless the Nigerian Government remedies this situation, very little progress will be made and none sustained. It will require strong and sustained political will and continued international assistance for any Nigerian government to confront these difficult issues and bring about meaningful change.

The U.S. government has expanded aid to Nigeria's counternarcotics efforts; counternarcotics assistance provided since February 2001 now totals over \$3 million. Although Nigeria does not produce reliable crime statistics, opinions vary on whether public security deteriorated throughout the country in 2007. The police remain grossly mistrusted by the Nigerian population and organized crime groups continue to exploit that mistrust by preying on citizens throughout the country.

Nigerian police are poorly trained. NDLEA has mandated that all its officers and operatives undergo re-training at the basic level and mid-level before qualifying for promotion under the new promotion scheme.

The U.S. government will continue to engage Nigeria on the issues of counternarcotics, money laundering and other international crimes. The underlying institutional and societal factors that contribute to narcotics-trafficking, money-laundering and other criminal activities in Nigeria are deep-seated and require a comprehensive and collaborative effort at all levels of law enforcement and government. Progress can only be made through Nigeria's own sustained effort and political will, and the continued support of the international community.

# Saudi Arabia

## I. Summary

The Kingdom of Saudi Arabia has no appreciable drug production and is not a significant transit country for drugs. Saudi Arabia's conservative cultural and religious norms discourage drug abuse. The Saudi Arabian Government (SAG) places a high priority on combating narcotics abuse and trafficking. Since 1988, the SAG has imposed the death penalty for drug smuggling. Drug abuse and trafficking are on the rise and are considered social and law enforcement problems. This rise has caused increased arrests and SAG policy responses, including a new education curriculum and the ongoing expansion of drug treatment facilities. Saudi Arabia is a party to the 1988 UN Drug Convention. SAG officials actively seek and participate in USG-sponsored training programs and are receptive to enhanced official contacts with the Drug Enforcement Administration.

## II. Status of Country

The Kingdom of Saudi Arabia has no significant drug production. Considering its conservative religious values and 1988 UN Drug Convention obligations, the Saudi Arabian Government (SAG) places a high priority on fighting narcotics abuse and trafficking. Narcotics-related crimes are punished harshly; narcotics' trafficking is a capital offense enforced against Saudis and foreigners alike. According to SAG officials, there were approximately 9 executions for narcotics-related offenses in 2007, as of October 2007. The SAG maintains a network of overseas drug enforcement liaison offices and state-of-the-art detection and training programs to combat trafficking.

While SAG officials are determined in their counternarcotics efforts, drug abuse and trafficking has nevertheless increased significantly. Since the SAG provides no public statistics on drug consumption, interdiction, or trafficking, it is difficult to substantiate this assessment with hard data. According to a December 30 Khaleej Times article, the late King Fahd bin Abdul Aziz commissioned King Saud University in 2002 to conduct a study on drug addiction in the Kingdom. This study claimed that the number of drug addicts rose from 109,000 in 2002 to 150,000 in 2005. According to a June 26 Khaleej Times article, the Saudi Interior Ministry released statistics that drug abuse increased by 17 percent in 2007. Anecdotal evidence suggests that Saudi Arabia's affluent population, porous borders, large numbers of idle youth, and high profit margins on smuggled narcotics attract significant numbers of drug traffickers and dealers.

SAG efforts to treat drug abuse are aimed solely at Saudi nationals, while expatriate substance abusers are jailed and summarily deported. There are three Al-Amal Mental Health and Narcotics Hospitals in Riyadh, Jeddah, and Dammam and one Al-Amal health clinic in Qassim Province offering free detox, rehabilitation, and aftercare. Each hospital has 200 beds and the Qassim clinic has 50 beds for male inpatients. Al-Amal Hospital in Riyadh has a 6-bed ward for female inpatients. The hospitals in Jeddah and Dammam treat women as outpatients. Health officials describe a noticeable increase in inpatients and outpatients throughout the country in 2007. Hospitals officials claim that 13 new mental health and addiction hospitals will be built throughout the country.

Saudi patients come from all classes and regions; however, the majority of upper class addicts reportedly rely on private clinics in and outside of Saudi Arabia. Patients vary in age from lower teens to septuagenarians, but Ministry of Health (MOH) officials claim that the overwhelming

majority are young men in their twenties and thirties. Most female patients have a male relative who is also addicted to drugs. There is reportedly a 50 percent patient recidivism rate. Most patients participate in detox and rehabilitation treatment for 3-5 weeks. A new 2007 program for select, motivated patients provides 2-3 months of treatment and counseling. Hospital officials claim that 70-80 percent of patients are addicted to amphetamines or marijuana and the remaining patients are addicted to heroin, cocaine, and sedatives. MOH and hospital officials note that newer patients have the dual diagnosis of addiction and psychiatric issues, possibly due to consumption of contaminated drugs—particularly Captagon.

Captagon, hashish, khat, and heroin are the most heavily consumed substances in order of prevalence. The wealthiest segments of society tend to consume the purest, highest potency drugs, while the majority of drug abusers consume more diluted forms. Captagon and other amphetamines are reportedly consumed mainly by students, drivers, and employees seeking prolonged energy. Khat is reportedly mainly consumed by Yemeni and Somali expatriates. Saudi officials say that heroin and cocaine are in greater demand in the two large Saudi cities of Jeddah and Dammam. Paint and glue inhalation and prescription drug abuse are also reported.

### III. Country Actions Against Drugs In 2007

**Policy Initiatives.** The lead agency in Saudi Arabia's drug interdiction efforts is the Ministry of Interior, which has over 40 overseas offices in countries representing a trafficking threat. There are reports that more offices will open in 2008. According to a June 25 Arab News article, Interior Minister Prince Naif bin Abdul Aziz announced that the SAG is setting up a fund to help people recovering from drug addiction to become productive citizens. In addition, the SAG continues to play a leading role in efforts to enhance counternarcotics intelligence sharing among the six nations of the Gulf Cooperation Council. The government also continues to block internet sites deemed to promote drug abuse.

The General Directorate for Combating Narcotics (General Directorate) coordinates SAG efforts across Ministries. The women's branch was established in 1988 and has approximately 40 female employees. The General Directorate launched an awareness campaign on June 24, 2007 targeting schools and families. According to a June 25 Arab News article, the campaign will develop a new school and college syllabi by 2008 on the dangers of drug use. Interior Minister Prince Naif bin Abdul Aziz has endorsed a plan for the General Directorate to work with the Education Ministry to implement this campaign. Efforts are underway to establish offices at schools to counsel students about the dangers of drug addiction.

According to a December 21, 2007 Arab News article, the National Anti-Drug Committee directs a 12-step rehabilitation program for Saudi addicts in each of the Kingdom's 13 provinces. The program, which began 8 years ago, runs between 3 months to 2 years depending on the case. 1,250 former addicts have participated in the program, which includes performing the annual *hajj* or pilgrimage to Mecca. According to Abdelilah al-Sharif, advisor to the Committee, only 20 of the 1,250 who performed the *hajj* have relapsed to addiction. The Committee chose 200 former drug addicts and dealers to take part in the 2007 *hajj*.

**Law Enforcement Efforts.** Drug seizures, arrests, prosecutions, and consumption trends are more frequently reported in local media. According to the November 13 Saudi Channel 1 "Sixty Minutes" program, Brigadier General Ahmad al-Zahrani, head of the General Directorate's drug combating section, claimed that his department has seized over 22,752,000 Captagon pills, over 5 tons of hashish, over 16.8 kilograms of heroin, and 4.3 kilograms of cocaine between May 2007

and November 2007. According to a November 6 Arab News article, the Saudi Directorate of Public Security was awarded a prize by the Council of Arab Interior Ministers for launching a new awareness campaign against drug addiction. Major General Othman ibn Nasser al-Mahraj, Chief of the General Directorate, lauded the help and cooperation of anti-narcotics departments in Syria, Turkey, Lebanon, and Gulf countries to foil smuggling attempts. He also argued that the new system regulating truck movement across borders was successfully minimizing drug smuggling.

**Corruption.** As a matter of government policy, the SAG does not encourage or facilitate illicit production or distribution of narcotic or psychotropic drugs or other controlled substances, or the laundering of proceeds from illegal transactions. There is no evidence of SAG officials' involvement in the production, processing, or shipment of narcotic and psychotropic drugs and other controlled substances. Anecdotal evidence suggests that drugs are widely used in Saudi prisons in which certain officers are involved in selling and distribution. Saudi Arabia has signed, but not ratified, the UN Convention Against Corruption.

**Agreements and Treaties.** Saudi Arabia is a party to the 1988 UN Drug Convention, the 1971 UN Convention on Psychotropic Substances, and the 1961 UN Single Convention as amended by its 1972 Protocol. Saudi Arabia is also a party to the UN Convention against Transnational Organized Crime and its protocols on trafficking in persons and migrant smuggling.

**Cultivation/Production.** Cultivation and production of narcotics in Saudi Arabia is minimal. According to academics and MOH officials, Khat production appears to be localized to the rural areas of the southern Jizan Province; most Khat is imported from Yemen.

**Drug Flow/Transit.** Saudi Arabia is not a major drug transshipment point. SAG officials say that stricter control measures practiced by the country have led to more seizures by Saudi Customs and Border officials. Drugs are smuggled in various manners, including via couriers who come to the Kingdom to participate in the annual *umra* and *hajj* ceremonies and via the land borders. Captagon and heroin are reportedly smuggled into the country from Eastern Europe and Turkey via the northern border with Jordan. Hashish is mainly smuggled via the southeastern border with the United Arab Emirates. Khat is mainly smuggled via the southern border with Yemen.

**Domestic Programs/Demand Reduction.** In addition to widespread media campaigns against substance abuse, the SAG sponsors drug eradication programs directed at school-age children, health care providers, and mothers. The Ministry of Civil Service began requiring applicants for certain civil service positions to take a drug test beginning in January 2007. Executions of convicted traffickers by well-publicized beheadings are believed by SAG officials to deter narcotics trafficking and abuse. The country's influential religious establishment actively preaches against the use of narcotics and SAG treatment facilities provide free services to Saudi addicts. The Director General of Prisons told the press that 13,000 prisoners (or 45 percent) are in Saudi jails due to drug convictions. He estimated that most addicted prisoners range in age between 19 and 29 years. He added that the Prison Directorate is building a "half-way" house for incarcerated addicts undergoing treatment after their sentences have been completed.

## IV. U.S. Policy Initiatives and Programs

**Bilateral Cooperation.** SAG officials actively seek and participate in USG-sponsored training programs and are receptive to enhanced official contacts with the Drug Enforcement Agency (DEA). Saudi Arabia is part of the International Counter-narcotics Office in Cairo that works closely with U.S. counternarcotics agencies. DEA invited Saudi officials to attend with observer

status the May 2007 International Drug Enforcement Conference, sponsored by DEA and State INL, in Madrid. Saudi Arabia and the United Arab Emirates were the first Arab countries to attend the conference. Over 80 other countries were in attendance, and Saudi Arabia has asked to be a member in 2008. In addition, two Saudi agents were invited to participate in Drug Unit Commander training at the DEA Academy in 2007.

DEA Cairo provided SAG officials several leads on potential trafficking. Most leads were developed in Pakistan and passed by DEA Islamabad to DEA Cairo. This information led to the arrest of 14 people and the interdiction of over 6 tons of hashish.

**The Road Ahead.** The U.S. will continue to explore opportunities for additional bilateral training and cooperation with Saudi counternarcotics and demand reduction officials.

# South Africa

## I. Summary

South Africa is committed to fighting domestic and international drug trafficking, production, and abuse. The country is an important transit area for cocaine (from South America) and heroin (from Central and East Asia) primarily destined for Southern African and European markets. South Africa is a large producer of cannabis (the world's fourth largest according to the South African Institute for Strategic Studies), most of which is consumed in the Southern African region, but at least some of which finds its way to Europe (primarily the UK). It also may be the world's largest consumer of mandrax, a variant of methaqualone, an amphetamine-type stimulant. Mandrax is a preferred drug of abuse in South Africa; it is smuggled, primarily from India but also from China and other sources. South Africa has also become a significant transit country for precursor chemicals. According to the Organized Crime Threat Analysis prepared by the South African Police Service (SAPS) for the period March 2006 to March 2007, 273 organized crime groups operate in South Africa. Most of the organized crime syndicates in South Africa are foreign-led—primarily Nigerian, followed by Pakistani and Indian syndicates. Chinese Triads are also present. The Prevention of Organized Crime Act (POCA, 1988), particularly its asset forfeiture section, has become a useful tool for law enforcement. South Africa is a party to the 1988 UN Drug Convention.

## II. Status of Country

South Africa's transition to democracy and its integration into the world economy were accompanied by the increased use of its territory for the transshipment of contraband of all kinds, including narcotics. An overloaded criminal justice system, straining hard just to deal with "street crime," makes South Africa a tempting target for international organized crime groups of all types. South Africa has the most developed transportation, communications and banking systems in Sub-Saharan Africa. The country's modern telecommunications systems (particularly cellular telephones), its direct air links with South America, Asia and Europe, and its permeable land borders provide opportunities for regional and international trafficking in all forms. The sanctions busting practices so prevalent in the apartheid era have continued under a different guise: instead of smuggling embargoed items, drugs and other illicit items are now smuggled into and out of South Africa. South Africa is both an importer and an exporter of drugs (marijuana produced on its own territory) and precursor chemicals.

Despite the progress it has made coping with organized crime, South Africa is the origin, transit point or terminus of many major drug smuggling routes. Cannabis, for instance, is cultivated in South Africa, imported from neighboring countries (Swaziland, Lesotho, Mozambique, Zimbabwe), exported to neighboring countries (e.g., Namibia) and Europe (mainly Holland, UK) and consumed in South Africa. LSD is imported from Holland. Methamphetamine is manufactured in South Africa for local consumption, and there has been an explosion in usage, especially in Cape Town and, more recently, in Pretoria. Both heroin and cocaine are imported into South Africa (from Asia and Latin America, respectively), and also exported to Europe, Australia and even the U.S. and Canada. Cocaine from Bolivia and Peru goes through Colombia to Brazil and Argentina, then to South Africa via Portugal or Angola or directly to Johannesburg. To stop some of this



trafficking, South Africa needs increased international cooperation and assistance in the effective use of international controlled deliveries and training.

South Africa ranks among the world's largest producers of cannabis. Most exports go to Europe and the UK but some shipments destined for Canada and possibly the United States have been detected. In terms of use of narcotics, heroin is a particularly dangerous new trend among South Africans, who traditionally only used "dagga" (the local name for marijuana). The Medical Research Council has reported that heroin abuse is increasing in Gauteng, Mpumalanga and the Western Cape. According to press reports, heroin is reportedly widely abused in Pretoria. South Africa is becoming a larger producer of synthetic drugs, mainly mandrax, with precursor chemicals smuggled in and labs established domestically.

As in previous years, a number of clandestine narcotics laboratories were dismantled. From January 2007 to September 2007, SAPS reported 52 labs detected and dismantled. Police reported that because of this crackdown, labs were increasingly established on farms, making it more difficult for the police to find and destroy them. The "South African Community Epidemiology Network on Drug Use" (SACENDU) reported that although alcohol remains the dominant substance of abuse in South Africa, cannabis and mandrax alone or in combination continue to be significant drugs of abuse. "Club drugs" and methamphetamine ("Tik" in South Africa) abuse are emerging as a major concern, especially in Cape Town and Pretoria where the increase in treatment demand for methamphetamine is dramatic.

Methamphetamine has emerged as the main substance of abuse among the young in Cape Town and in Pretoria. In Cape Town, two-thirds of drug abusers are reported to be using Tik as a primary or secondary substance of abuse. The increase in treatment admissions for methamphetamine-related problems in Cape Town represented the fastest increase in admissions for a particular drug ever noted in the country, and of particular concern is the large number of adolescent users. Police officials recently reported that the use of Tik in the Western Cape is growing at the rate of 300 percent year-on-year. This increased use of methamphetamine is "strongly linked to gang culture on the Cape Flats."

### III. Country Actions Against Drugs in 2007

**Policy Initiatives.** Combating the use of, production of, and trafficking in illicit narcotics is an important component of the anticrime agenda of the South African Government (SAG). As a practical matter, however, the SAG tends to target its limited anticrime resources on serious, violent and domestic crime. South Africa has one of the world's highest rates of murder and rape. The porous borders are crossed daily by criminals trafficking in all sorts of contraband, including illicit drugs, stolen cars, illegal firearms, diamonds, precious metals, and human beings. The Cabinet interagency "Justice Cluster" works to help coordinate the law enforcement and criminal justice system's response to those challenges. The Narcotics Bureau was integrated into the police organized crime units in 2003. There is also a Central Drug Authority. Other SAG agencies involved in counter narcotics efforts include—in varying degrees—the Home Affairs Department, the National Prosecuting Authority and its Directorate of Special Operations (DSO) (popularly known as "The Scorpions"), the Customs Service, and the Border Police (a part of SAPS). The U.S. helped train the DSO. The Border Police have 55 land border posts, 10 air-border posts and 9 sea-border posts. Intelligence organizations and the port and airport authorities also have a role in identifying and suppressing drug trafficking. The SAPS 2005/2006 Annual Report noted that an analysis of threats from organized crime groups over the past decade identified drug threats as

accounting for the largest proportion of the known threats. The report said that drug smuggling as an organized crime activity usually ties in with other aspects of organized crime, such as diamond smuggling, gold smuggling, abalone pirating and vehicle hijacking. SAPS concluded that drugs such as mandrax, cocaine, heroin, Ecstasy and Tik pose major threats to South Africa since they lead to violent crime such as murder, attempted murder, rape and assaults.

**Law Enforcement Efforts.** SAPS reported that between March 2006 and March 2007 the following quantities of drugs were seized:

- Cannabis (excluding plants): 213,114.987kg (street value in Rand: 277 million), as against 290,117.108 kg during 2005/2006; in addition, 3,407,515 plants were eradicated during this reporting period (one U.S. dollar equals approximately seven South African Rand);
- Methaqualone: 212,580 dosage units or: 129.6 kg;
- Cocaine: 1.24 MT;
- Heroin: 7.7 kg;
- LSD: 225 dosage units;
- Amphetamine-type stimulants (ATS): 42,082 dosage units or: 75.1 kg.

The number of detected drug-related crimes, according to the annual SAPS Report, grew during this reporting period from 95,690 in 2006 to 104,689 in 2007, a 9.4 percent increase. Ninety-five percent of these crimes were referred to court. The number of arrests at the border for this period was 231, compared with 383 in 2005/2006. The value of drugs seized at the country's borders also increased from Rand 37,921, 326 in 2005/2006 to Rand 39,106,816.

Additional enforcement successes were reported in the press. For instance: In May 2007, SAPS seized cocaine worth Rand 60 million at the OR Tambo International Airport in Johannesburg bringing the total value of cocaine seized at that airport over the last two years to between Rand 200 million and Rand 300 million. SAPS conducted 10 international controlled deliveries this reporting period – one from Pakistan, two from India, three from the UK, one from France, one to Lesotho, one to Brazil and one to the UK. SAPS' Airport Interdiction Unit makes weekly seizures of cocaine from South America and heroin from Pakistan at the Johannesburg and Cape Town Airports.

**Corruption.** Accusations of police corruption are frequent; although the experience of enforcement officers working from the U.S. Embassy is that many of the failures and lapses by the police can be attributed to a lack of training and poor morale. Credible evidence of narcotics-related corruption among South African law enforcement officials has not been brought to light. Some suspect that the reported quantities of seized drugs are lower than actual seizures, and that the difference finds its way back out on the street. Some amount of corruption among border control officials does appear to contribute to the permeability of South Africa's borders. As a matter of policy, however, the South African government does not encourage or facilitate the illicit production or distribution of narcotic or psychotropic drugs or other controlled substances, or the laundering of proceeds from illegal drug transactions. Likewise, no senior official of the federal government is known to engage in, encourage or facilitate such illicit production, or to launder proceeds of illegal drug transactions, to post's knowledge.

**Agreements and Treaties.** South Africa is a party to the 1988 UN Drug Convention, the 1971 UN Convention on Psychotropic Substances, and the 1961 UN Single Convention as amended by the 1972 Protocol. South Africa is a party to the UN Convention against Corruption, and is also a party to the UN Convention against Transnational Organized Crime and its protocols against trafficking in persons, migrant smuggling and illegal manufacturing and trafficking in firearms. The U.S. and South Africa have bilateral extradition and mutual legal assistance agreements in force, as well as a Letter of Agreement on Anticrime and Counter-narcotics Assistance. The Letter of Agreement provides for U.S. training and commodity assistance to several South African law enforcement agencies. In 2000, the U.S. and South Africa signed a Customs Mutual Assistance Agreement.

**Cultivation/Production.** Cannabis or “dagga” grows wild in Southern Africa and is a traditional crop in many rural areas of South Africa, particularly the Eastern Cape and Kwa-Zulu Natal provinces. It also grows wild and is cultivated in neighboring Swaziland and Lesotho. It is possible to have three cannabis crops a year on the same piece of land in South Africa. Most South African cannabis is consumed domestically or in the region. Increasing amounts are, however, being seized in continental Europe and the UK. Some top-end estimates are that 20,000 to 30,000 hectares of arable land are used to grow cannabis, although most observers estimate the area dedicated to illicit cannabis to be about 1,500-2,000 hectares. Although the police force, with some success, sprays cannabis in South Africa, Swaziland, and Lesotho, illicit street prices never seem to raise – an indication of uninterrupted supply.

Mandrax, amphetamine, and methamphetamine are also produced in South Africa for domestic consumption. Among South Africans, “dagga” and mandrax are the traditional drugs of choice; in more recent years, there has been rising interest in domestically produced ATS and imported heroin.

**Drug flow/Transit.** Significant amounts of cocaine reach South Africa from South America. Cocaine is readily available on the local illicit market. Cocaine is mainly brought in by Nigerian syndicates, or people who work for them. South Africa, once a country of transshipment, has become a country with its own market. The consumption of cocaine, both powder and crystalline (“crack”), is on the increase. Heroin is smuggled into South Africa from Southeast and Southwest Asia, with some moving on to the U.S. and Europe. Most heroin trafficked into South Africa is intended for domestic consumption. Consumption of heroin among South African youth has increased with the advent of smokable heroin. An additional risk in terms of intravenous drug abuse is HIV/AIDS, a major health issue in South Africa. South Africans also import “dagga” from Swaziland and Lesotho, considering it to be of higher quality than the domestic version. Abuse of methaqualone (Mandrax) and other ATS tablets is on the rise too, especially among urban youth. Even Ecstasy finds its way into townships. Diverted precursor chemicals, some produced locally and some imported into South Africa, are also a growing problem. Many drug liaison officers, as well as South African Police Service officers, believe that South Africa is becoming a place for traffickers to warehouse their stocks of various drugs before sending them on to other countries. They believe that criminals view South Africa as a “weak enforcement” option for such warehousing operations. Nigerian, Pakistani, Indian, Colombian, Venezuelan, and Chinese syndicates are all taking advantage of the fact that South Africa, in addition to “weak enforcement,” has excellent financial, transportation, and communications facilities. SAPS reports that between January and September 2007, the chemical monitoring program to prevent the diversion of chemicals for the manufacture of illicit drugs checked 295 import notifications of precursors to South Africa.

A total of 1,468 export notifications of precursors were forwarded to relevant foreign authorities, which is a 64 percent increase over the past year. This increase in exports is partially due to the SAPS' increased reporting and South Africa's lead role in the production of pharmaceuticals in Africa. Traffickers of Nigerian origin may be the most established of organized crime groups operating in South Africa. Using South Africa as their base for world-wide operations, they are involved in virtually every aspect of drug trafficking.

South Africa is the third-largest non-U.S. importer of pseudo ephedrine and the fourth-largest non-U.S. importer of ephedrine. The latest Global Trade Atlas (<http://www.gtis.com/gta/>) statistics indicate South Africa's imports of ephedrine in 2003 were 5,703 kilograms and increased in 2005 to 14,374 kilograms; there was a sharp decline to 7,175 Kg in 2006. Even more significant, imports of pseudo ephedrine in 2003 to South Africa were 3,840 kilograms in 2003 and increased to 91,400 kilograms in 2005. In 2006, pseudoephedrine imports fell precipitously to 10,733 Kg. The imports are reportedly for use by the domestic pharmaceutical industry, which markets both locally and regionally. While the South African Police Service's Chemical Control Program is by far the most progressive in Africa, the potential for diversion of this ephedrine and pseudo ephedrine is an area of concern. South Africa participates in the UN sponsored program Project Prism and is a member of the Project Prism Task Force, serving as the focal point for Africa. South Africa is actively involved in the law enforcement initiatives being developed pursuant to Project Prism to halt the diversion of precursors to illicit chemical trafficking and drug manufacturing organizations around the world. During the course of the past year, DEA's office in Pretoria has participated with South African authorities on a number of investigations involving methamphetamine precursors with the potential to impact the United States.

**Domestic Programs.** South Africa has had a long history of mandrax and "dagga" (cannabis) abuse; drug counselors have noted large increases in the number of patients seeking treatment for crack and heroin addiction. SAG treatment facilities and non-government drug rehabilitation agencies have seen their budgets for treatment cut the last few years. There are many people seeking treatment who are unable to register with any program, and those who manage to enter a rehabilitation program find that available services are constrained by lack of resources. Education of the general public about the dangers of drug addiction remains a high priority for the government. SAPS is continuing its visible crime deterrence policy by organizing visits and counternarcotics lectures in schools with assistance from the Department of Education and NGOs. The objective is to curb the influence of illegal drugs among children. The National Awareness Program, sponsored by the United Nations Office for Drugs and Crime (UNODC), the Department of Safety and Security and the Central Drug Authority, and originally launched in Cape Town in 2003, continues to present facts on drugs and their dangers to young people, students and others, under the slogan "Ke Moja" ("No Thanks, I'm Fine!").

Certain successes have been achieved within the correctional system as well, mainly through the efforts of NGOs. In South African prisons, up to 70 percent of inmates are drug users (with an even higher percentage among incarcerated defendants awaiting trial), according to NGO contacts. Among the main rehabilitation program organizers are KHULISA, the Center for Socio-Legal Studies, Creative Education with Youth at Risk, the President's Award for Youth Empowerment, and the National Institute for Crime Prevention and the Reintegration of Offenders (NICRO). These NGOs are partly funded by State Department narcotics assistance. "Peer" counselors, trained by KHULISA within the prison system, continue to organize counternarcotics lectures and seminars for inmates. Some of the government-employed prison officials have also received basic training in this area.

### IV. U.S. Policy Initiatives and Programs

**Policy Initiatives.** U.S. law enforcement officers from the DEA, FBI, DHS/ICE (Immigration & Customs Enforcement), the Secret Service, and the State Department successfully cooperate with their South African counterparts. The U.S. also continues to urge the SAG to strengthen its legislation and its law enforcement system to be able to prosecute more sophisticated organized criminal activities, including drug trafficking. The Scorpions, with U.S. training, have targeted organized crime and high-profile crime of all sorts. Some training has also been provided to the national police, the metropolitan police forces of Johannesburg and Tshwane (Pretoria), the Special Investigating Unit, the Department of Home Affairs, the Customs and Revenue Service, and others.

**The Road Ahead.** Bilateral links between the United States and South African law enforcement communities are in the interest of both countries and even closer cooperation is needed. Assistance from the U.S. and other donors is essential to help develop the law enforcement system in South Africa.

# Syria

## I. Summary

In 2007, the Government of the Syrian Arab Republic (SARG) continued to publicize its efforts to interdict and punish drug smugglers, while downplaying domestic narcotics consumption. Syria remains primarily a transit country for narcotics en route to more affluent markets in Europe and the Persian Gulf. Continuing political conflicts in Lebanon and Iraq, porous borders, and endemic police corruption make Syria an attractive overland smuggling route between Europe/Turkey and the Persian Gulf. Domestic Syrian consumption of illicit drugs is not widespread, largely due to harsh penalties and cultural norms stigmatizing substance abuse. However, recent reports indicate an increasing prevalence of local prescription drug abuse, particularly in Aleppo. Syria continues to have a working anti-narcotics relationship with Saudi Arabia and Jordan, but counternarcotics cooperation with Lebanon has diminished since Syrian forces withdrew from Lebanon in 2005. Syria is a party to the 1988 UN Drug Convention.

## II. Status of Country

Syria is not a major producer of narcotics or precursor chemicals. Due to political conflicts in neighboring Lebanon and Iraq, however, Syria is an increasingly important transit country for narcotics between Europe and the Persian Gulf. Hashish, heroin and cocaine are, respectively, the most prevalent narcotics transiting Syria destined for Lebanon and Europe. Syria is also along the trafficking route for Captagon (fenethylline), a synthetic amphetamine-type stimulant. Captagon is increasingly trafficked through Syria from Turkey and Lebanon to the Gulf States. A newer phenomenon, however, is the smuggling of Captagon through Syria to Iraq for use by foreign fighters and insurgents.

## III. Country Actions Against Drugs in 2007

**Policy Initiatives.** Syrian drug policy is based on Law No. 2 of 1993, which authorizes harsh punishment – including capital punishment – for those convicted of narcotics manufacturing, trafficking, or sales. However, the same law prescribes treatment at state-operated rehabilitation facilities for drug addicts who surrender to the police. Provided addicts have no other serious criminal offenses, and make a good faith effort during treatment programs, Law No. 2 exempts them from punishment. Authorities admit that some drug dealers have exploited this aspect of the law to avoid incarceration and locate additional customers.

In 2002, Syria upgraded its Counternarcotics Unit from a branch to a directorate of the Interior Ministry. The government also opened regional counternarcotics offices in Aleppo province, covering the Turkish border, and in Homs province, to monitor the Lebanese border, with eventual plans to open offices in the remaining provinces. A new police facility for the Syrian Anti-Narcotics Department was opened in Damascus during the early part of 2006. With the opening of the new facility came the arrival of new and updated equipment that will be used to enhance Syria's drug investigation capabilities. This facility also houses the country's newest drug lab. In 2005, Syrian officials implemented its 2002 draft decree of providing financial incentives of up to several million Syrian pounds (\$1 = 50 SP) to anyone providing information about drug trafficking and/or illicit drug crop cultivation in Syria.

**Law Enforcement Efforts.** According to recently-published statistics for 2006, the Syrian government confiscated 172 kg of hashish, 65 kg of heroin, 19 kg of cocaine, 8.9 million Captagon tablets, 200,000 other assorted narcotics tablets and 6.8 MT of precursor materials. Currently, Lebanese hashish sells for \$1 per gram on the street in Syria, while one gram of clean heroin brings \$30, and one gram of cocaine costs about \$120. Thus, the 2006 seizures represent a street value of over \$4.6 million.

In 2007, 48 percent of all drug crimes in Syria were committed in greater Aleppo, likely due to its proximity to the Turkish border. Consequently, Syria's law enforcement efforts to combat narcotics smuggling concentrated primarily on Aleppo and at border-crossing points. In early August, Aleppan authorities arrested an infamous Syrian smuggler in possession of 1000 kg of narcotics and Captagon tablets, 600,000 Euros, \$500,000 in U.S. Dollars, and 4.5 million Syrian Pounds. In another Aleppo-based operation in October, Syrian police arrested nearly 700 smaller-scale drug dealers and seized several residential labs for manufacturing sedatives. At the Al Tanf checkpoint on the Iraqi border in September, an Iraqi refugee was caught attempting to smuggle 92 kg of hashish in his car. And in perhaps the most high-profile drug-related sentencing of the year, the Criminal Court of Lattakia gave the death penalty to a Syrian dealer who was apprehended with 11kg of heroin originating from Turkey.

Syrian officials characterized cooperation on drug issues with neighboring Saudi Arabia and Jordan as excellent, but say that counternarcotics cooperation with Lebanese and Iraqi officials has diminished. Turkey continues to provide some technical assistance to Syria, primarily training courses, as part of their joint efforts to combat trafficking of narcotics, according to Turkish officials based in Damascus.

**Corruption.** Generally speaking, corruption is a daily fact of life in Syria. Cultural acceptance of corruption, in addition to below-average compensation for police and customs officials, creates an environment ripe for smuggling. The Syrian government did not provide information whether it had conducted any investigations into corruption, and the SARG has been reluctant to discuss this issue further. The Syrian government has an Investigations Administration (Internal Affairs Division) responsible for weeding out corrupt officers in the counternarcotics unit and the national police force. The Investigations Administration is independent of both the counternarcotics unit and the national police and reports directly to the Minister of the Interior. As a matter of government policy, the Government of Syria does not encourage or facilitate illicit production or distribution of narcotic or psychotropic drugs or other controlled substances, or the laundering of proceeds from illegal transactions.

**Agreements and Treaties.** Syria is a party to the 1988 UN Drug Convention, the 1961 UN Single Convention as amended by the 1972 Protocol, and the 1971 UN Convention on Psychotropic Substances. Syria has signed, but not yet ratified, the UN Convention against Transnational Organized Crime and the UN Convention against Corruption. Syria and the United States do not have a counternarcotics agreement, nor is there an extradition treaty between the two countries. In 2007, the Syrian Interior Ministry signed an Agreement of Cooperation with the Russian Anti-Drug Trafficking Authority. The Agreement provides for a bilateral exchange of information and expertise, law enforcement training joint scientific chemical research and regularly occurring workshops. Also, the Iranian National Police offered to share their experience in counternarcotics with a delegation of Syrian police in the near future, although no date for the exchange was confirmed.

**Cultivation/Production.** Traditional drug cultivation and production remain at negligible levels in Syria. However, Syria does have a sizable, legitimate pharmaceutical industry that produces inexpensive prescription pain medication, among other drugs. Currently, the trafficking of prescription pain medicine is not legally categorized as the equivalent offense of trafficking in illicit drugs, despite the addictive nature of most prescription painkillers. Additionally, Syrian law currently supports the common practice of “leasing” a licensed pharmacist’s credentials. In this practice, investors may “lease” a pharmacist’s credentials in order to open and operate a licensed pharmacy in Syria. A pharmacist will receive payment for allowing his/her name to appear on the business registration, but the pharmacist may have nothing further to do with the operation of the pharmacy.

In 2007, multiple media reports highlighted significant abuse of prescription drugs in Aleppo, specifically Valium, Baltan and Proxamol. Several pharmacists were threatened with violence by addicts and dealers attempting to obtain painkillers without a prescription. After accounts of taxi drivers being beaten and robbed, many Aleppan taxis refused to enter certain neighborhoods known for prescription drug trafficking activity. An Aleppan social worker also reported seeing an increasing number of cases of children as young as 10 addicted to prescription pills. Responding to these reports, Syrian police closed 50 pharmacies in the greater Aleppo area in late October for selling prescription painkillers to customers without a doctor’s prescription. As each of the offending pharmacies was operated by a businessman leasing a pharmacist’s credentials, the Aleppan Pharmacists Union requested the government’s intervention to close this legal loophole.

**Drug flow/transit.** Syrian officials estimate that in 2007, the overall flow of illegal narcotics transiting Syria and destined for other countries had increased. As mentioned above, one likely reason for this increased traffic is that the continuing political conflicts in Lebanon and Iraq have made Syria a more attractive overland smuggling route between Europe/Turkey and the Gulf. Also due to political instability in Lebanon, Damascus has replaced Beirut as the favored summer vacation destination for many wealthy Gulf Arabs and Iranian tourists, which has increased local demand for illicit substances.

Transshipment of narcotics from Turkey continues to represent the major challenge to Syria’s counternarcotics efforts, as the porous Turkish/Syrian border provides easy entry points for drug smuggling into Syria. Narcotics coming from Iraq are transported into Syria either directly or via Jordan. The SARG’s reported seizure statistics suggest that SARG counternarcotics efforts have been more effective, or more likely, the overall flow of narcotics has increased. Main shipment routes include the transit of hashish and cocaine through Syria to Europe and other countries in the region; opium transiting from Pakistan and Afghanistan through Syria to Turkey; and Captagon pills transiting from Turkey through Syria to Saudi Arabia and Iraq.

**Domestic Programs.** The Syrian government’s counternarcotics strategy, which is coordinated by the Ministry of the Interior, uses the media to educate the public on the dangers of drug use and drug awareness is also part of the national curriculum for schoolchildren. The Ministry also conducts awareness campaigns through university student unions and trade unions. The SARG also regularly publishes accounts of successful law enforcement efforts to combat narcotics in the various government-owned media outlets.

Due to the social stigma attached to drug use and to stiff penalties under Syria’s strict anti-trafficking law, domestic consumption of illicit drugs remains low. In 2007, the head of Syria’s Counternarcotics Directorate claimed that there were no more than 150 drug users per one million citizens, or roughly 3000 nation-wide. Although there are no independent statistics available to



verify the accuracy of this claim, anecdotal evidence suggests the SARG is significantly underestimating the prevalence of illicit drug use in Syria. Furthermore, the government's estimate likely does not include prescription drug abusers, as mentioned above. Unless the government enacts legislation to close the loophole allowing businessmen to "lease" pharmacists' credentials, increases the penalties for trading prescription medication, and raises public awareness of this problem, it will likely grow.

#### **IV. U.S. Policy Initiatives and Programs**

**Policy Initiatives.** In discussions with Syrian officials, DEA officials continue to stress the need for diligence in preventing narcotics and precursor chemicals from transiting Syrian territory and the necessity of terminating any involvement, active or passive, of individual Syrian officials in the drug trade.

**Bilateral Cooperation.** DEA officials based in Nicosia, Cyprus maintain an ongoing dialogue with Syrian authorities in the Counternarcotics Directorate.

**The Road Ahead.** The United States will continue to encourage the Syrian government to maintain its commitment to combating drug transit and production in the region; to strengthen anti-money-laundering legislation; and to continue to encourage Syria to improve its counternarcotics cooperation with neighboring countries.

# Togo

## I. Summary

Togo is not a significant producer of drugs. Its role in the transport of drugs is primarily regional. During 2007 the drug trade (particularly in hard drugs) continued to increase. Lome remains a spoke in the Nigerian hub of narcotics trafficking and money laundering. Togo's ability to address the transnational flow of drugs is undercut by its fragile democratic transition, extreme poverty, a lack of resources and training and long, porous borders. Togo is a party to the 1988 UN Drug Convention.

## II. Status of Country

Drug abuse by Togo's citizens is relatively rare, and there are few crimes resulting from drug abuse. There are three agencies responsible for drug law enforcement—the police, the gendarmerie, and customs. The only locally produced drug is cannabis, but in small quantities for individual consumption. Approximately two metric tons of cannabis is seized in Togo each year. Heroin and cocaine, while not produced in Togo, are also available. Heroin is smuggled from Afghanistan, while cocaine is transported from South America. Lome serves as a transit point for drugs on their way to Benin, Nigeria, Burkina Faso, northern Ghana, and Niger and ultimately to Europe. Togolese are not significant consumers. According to police, most smugglers are long-term Lebanese residents or Nigerians, but the gendarmerie is also targeting the Togolese players. Togolese small-time traffickers typically purchase small amounts of drugs and then resell them to expatriates living in Lome for local consumption. Togo's long and relatively porous borders permit narcotics traffickers easy access/egress. This has made Togo a transit point for narcotics such as cocaine and heroin. Many narcotics trafficking arrests in Togo have involved Nigerian nationals traveling from Asia to other West African destinations. The most common means of trafficking is through shipping, but the Lome airport also serves as a transit point. The prevalence of widespread official corruption facilitates drug trafficking.

## III. Country Actions Against Drugs in 2007

**Policy Initiatives.** The Central Office Against Drugs and Money Laundering is responsible for investigating and arresting all persons involved in drug-related crimes. The office has approximately twenty gendarmes and ten police personnel to conduct investigations and enforcement operations. Security agencies report all drug-related matters to the Director of the Central Office. The Director of the Central Office, in turn, is directly responsible to the Minister of Security. The National Anti-Drug Committee, which consists of representatives from various offices, including security, defense, commerce and finance, meets periodically to coordinate. A data bank, created among Togo, Benin, and Ghana, and including the best ideas on narcotics control contributed by experts from each country to facilitate counternarcotics operations in the sub-region, has proved quite useful. While Ghana and Togo regularly contribute to the bank, Benin has yet to play an active role.

**Law Enforcement Efforts.** The number of drug-related arrests decreased in 2007. Only occasional spot checks are made of passengers at the airport. The Port of Lome's cargo screening ability should, in the future, aid the interdiction of drugs arriving by sea. Arrests have been mainly at the land border crossings and in Lome; the vast majority of trafficked drugs cross land borders. Arrests

are sometimes made after a tip, but are most often made in the course of other routine law enforcement activities, such as traffic security or customs checks. The greatest obstacles that the Government of Togo (GOT) faces in apprehending drug distributors are the government's lack of computer technology, lack of communication and coordination, and mutual distrust among the three agencies responsible for drug law enforcement. While all agencies are required to report narcotics related crimes to the Central Office, in practice there is no effective reporting, record keeping, or cross-agency communication process.

**Corruption.** The Anti-Corruption Commission made no drug-related arrests of government officials. Togo's former chief narcotics officer, who was held under house arrest for several months in 2006 under suspicion that he had diverted a quantity of captured drugs being held as evidence for resale, was released in September 2006 and is now the commander of a gendarme company in Dapaong, in Northern Togo. Reports continue to abound that unnamed officials in various GOT agencies can be bribed to allow illicit narcotics to transit to or through Togo. At least some of these reports are sourced to prominent expatriated former officials, who were well positioned to know when they still were in Togo. If these reports are true, they would help explain the growing transit of drugs through Togo.

**Agreements and Treaties.** Togo is a party to the 1988 UN Drug Convention, the 1971 UN Convention on Psychotropic Substances, and to the 1961 UN Single Convention, as amended by its 1972 Protocol. Togo is a party to the UN Corruption Convention and is also a party to the UN Convention against Transnational Organized Crime.

**Cultivation/Production.** The only drug cultivated in any significant quantity in Togo is cannabis, but even production of that is small. Cultivation is primarily for local demand, although some cross border distribution by small-scale dealers is suspected. Domestic use of cannabis is increasing.

**Drug Flow/Transit.** There are sizable expatriate Nigerian and Lebanese populations involved in Togo's drug trade, and they arrange for drug transshipments from many places in the world, through Africa, and onward to final markets. Many observers of drug trafficking in West Africa believe that hard drugs like cocaine and heroin are "warehoused" in the region before being sent to final consumption markets, mostly in Europe.

**Domestic Programs (Demand Reduction).** The National Anti-Drug Committee (CNAD) opened a youth counseling center that shows counternarcotics films and sponsors counternarcotics discussion groups. The programs have been well attended by NGOs, religious groups, and school groups composed of parents, teachers, and students. Programs designed for high school students focused heavily on prevention/non-use. The CNAD also sponsored programs for security forces that stressed the link between drug use and HIV/AIDS.

#### IV. U.S. Policy Initiatives and Programs

**Policy Initiatives.** The primary goal of the U.S. is to help the GOT combat the international trafficking of drugs. The U.S. seeks to help the government improve its ability to interdict illicit narcotics entering Togo and to prosecute traffickers.

**The Road Ahead.** U.S. cooperation with Togolese counternarcotics officials will continue. USG-funded narcotics assistance will be used for Togolese counternarcotics infrastructure improvements. With the assistance of the regional Drug Enforcement Agency representative based in Lagos, the U.S. Embassy will continue to look for ways to provide counternarcotics trafficking training to Togolese law enforcement personnel. Togo's emerging willingness to confront the issue

of illicit drugs is hampered by the country's fragile democratic transition and the weak state of GOT finances.

# United Arab Emirates

## I. Summary

Although not a narcotics-producing country, the United Arab Emirates (UAE) is believed to be a transshipment point for traffickers moving illegal drugs from major drug production and transit countries, including Afghanistan, Pakistan, and Iran. Frequent reports of seizures of illegal drugs in the UAE over the past few years underscore this conclusion. Most seizures have been of hashish. There are several factors that render the UAE a transit point, including its proximity to major drug cultivation regions in Afghanistan, and a long (700 kilometer) coastline. High volumes of shipping render UAE ports vulnerable to exploitation by narcotics traffickers. There are numerous reports that drugs leave Iran and Pakistan by vessel and move to the UAE, among other destinations, in the Gulf. In September 2005, the U.S. DEA established a country office in the UAE to enhance cooperation with UAE law enforcement authorities. In 2007, the UAE was re-elected as the Asian regional representative to the Commission on Narcotic Drugs (CND). The UAE is a party to the 1988 UN Drug Convention.

## II. Status of Country

A major regional financial center and hub for commercial shipping and trade, the UAE is a transshipment point for illegal narcotics from Afghanistan, to Europe, to Africa, and less significantly, to the United States, as well as a key location for narcotics money laundering by international drug traffickers—including possibly from South America. Western Europe is the principal market for transiting drugs, and Africa is becoming an increasingly prominent market. Factors that contribute to the role of the UAE as a transshipment point are the emergence of Dubai and Sharjah as regional centers in the transportation of passengers and cargo, a porous land border with Oman, an easily accessible commercial banking system, and the fact that a number of ports in the UAE have free trade zones where transshipped cargo is not usually subjected to the same inspection as goods that enter the country.

## III. Country Actions Against Drugs in 2007

**Policy Initiatives.** The UAE continued to advance its national drug strategy focusing on intensifying security at the country's air and sea ports and patrols along the coastline, reducing demand for illegal drugs through educational campaigns, enforcing harsh penalties for trafficking, and rehabilitating drug addicts. On March 29, 2007, Dubai Police and the United Nations Office on Drug and Crime (UNODC) signed a \$1.2 million project, fully funded by the Dubai Police, to combat drug abuse and drug trafficking in the UAE and in the region. The project will last for two and a half years (starting from April 2007). The project agreement has four elements. Dubai Police will play a leading role in reversing increased drug trafficking and drug abuse among young people in the UAE and other states of the region. UNODC will help upgrade the Dubai Police Training Centre into a centre of excellence for the region-wide transfer of knowledge and the training of law enforcement staff to ensure they have the skills needed to cope with an increased influx of narcotic drugs. UNODC will assist Dubai and the UAE as a whole to develop a coordinated national action plan on drug demand reduction. UNODC will help develop and implement national drug abuse and HIV/AIDS prevention modules for schools and universities to address young people in a way that suits the culture of the Gulf region.

In September of 2005, the UN established a sub-office on Drugs and Crime in Dubai. The UAE government funded the estimated \$3 million cost of the office and contributed an additional \$50,000 to the UN counternarcotics program.

**Law Enforcement Efforts.** According to published remarks of the Director of Drugs Department of the Ministry of Interior, speaking at the Arab Symposium for Planning and Strategic Cooperation in Combating Drugs, the UAE arrested 3,869 people in drug cases from 2006 to August 2007. During that timeframe, the total amount of seized hashish was 1,286 kg, heroin 240 kg, opium 13 kg, and approximately three million “drug tablets.” Abu Dhabi Police reported 162 arrests in the first half of 2007. Most of the arrestees were Iranians, Pakistanis, Africans and some UAE nationals. By way of example, in August 2007, Dubai customs inspectors stopped 33 smuggling attempts of hashish, opium, marijuana and other narcotic drugs.

A 1995 law stipulates capital punishment as the penalty for drug trafficking. Sentences usually are commuted to long-term imprisonment. In March 2007, the Sharjah Islamic Sharia Court handed down a death sentence to an Iranian drug trafficker who smuggled 267kg of hashish into the UAE. In April 2007, Ajman Court sentenced a drug trafficker to life imprisonment. UAE authorities continue to take seriously their responsibility to interdict drug smuggling and distribution. UAE authorities continue to cooperate with other countries to stop trafficking. In June 2007, UAE Ambassador to Pakistan, Ali Al Shamsi announced to the Associated Press of Pakistan (APP) that the UAE already had a drug liaison office in Islamabad and was in process of establishing another one in Karachi.

**Corruption.** The Government of the UAE as a matter of policy does not encourage or facilitate illicit production or distribution of narcotic or psychotropic drugs or other controlled substances or the laundering of proceeds from drug transactions. Senior officials are not known to engage in or facilitate illicit production of these drugs or the laundering of proceeds from drug transactions. There is no evidence that corruption-including narcotics related corruption-of public officials is a systemic problem.

**Agreements and Treaties.** The UAE is party to the 1988 UN Drug Convention, the 1961 UN Single Convention as amended by the 1972 Protocol and the 1988 UN Convention on Psychotropic Substances. The UAE ratified the UN Convention against Transnational Organized Crime on May 7, 2007. The UAE is a party to the UN Convention against Corruption.

**Cultivation/Production.** There is no evidence of any major drug cultivation and/or production in the UAE. Published records show that there were two cases of “planting” drugs in the Emirate of Ras Al-Khaimah in 2004, with a total of three people arrested.

**Drug Flow/Transit.** High volumes of shipping and investment development opportunities render the UAE vulnerable to exploitation by narcotics traffickers and narcotics money laundering. The UAE, Dubai in particular, is a major regional transportation, financial, and shipping hub. Narcotics smuggling from South and Southwest Asia continues to Europe and Africa and, to a significantly lesser degree, the United States via the UAE. Hashish, heroin, and opium shipments originate in Afghanistan, Pakistan, and Iran and are smuggled in cargo containers, via small vessels and powerboats, and/or sent overland via Oman. According to published figures, Iranians, Pakistanis, Afghans and Africans made up the largest number of non-UAE nationals arrested in drug cases in 2007. Recognizing the need for increased monitoring at its commercial ports, airports, and borders, the UAE is making an effort to tighten inspections of cargo containers as well as passengers transiting the UAE. In December 2004, the Emirate of Dubai signed the Container Security

Initiative (CSI) with the U.S. CSI inspectors arrived in Dubai in 2005, and are inspecting containers destined for the U.S. Customs officials randomly search containers and follow-up leads on suspicious cargo.

**Domestic Programs/Demand Reduction.** In 2003, the UAE's Federal Supreme Court ruled that authorities needed proof that drug use occurred in the UAE before they could prosecute users. A positive blood test is considered evidence of consumption, but not evidence of where the consumption took place. A 2003 report noted that the majority of UAE drug users take their first doses abroad, primarily because of peer pressure. Statistics reveal that 75 percent of drug users in the UAE prefer hashish, 13 percent use heroin, while six percent use morphine. The report illustrates a clear relationship between drug abuse and level of education-75 percent of arrested drug users in 2002 were high school graduates, but only two percent were university graduates. While the data is a few years old, trends reported are still reflective of current societal patterns. The focus of the UAE's domestic program is to reduce demand through public awareness campaigns directed at young people.

The UAE has also established rehabilitation centers and several awareness programs. It has been issuing postage stamps to highlight the hazards of drugs as part of its awareness campaigns. Every year, the Ministry of Interior holds a high-profile "Drug Awareness Week" with exhibits prominently set up in all of the local shopping malls to coincide with International Anti- Narcotics Day on June 26 every year. The theme of the 2007 commemorations in Abu Dhabi was "Drugs, The Way To Peril, So Choose Your Way."

The UAE has trained volunteers to educate people about the risks of drug use. During 2007, Dubai police trained both Emirati volunteers in UAE and 30 volunteers from Kuwait.

UAE officials believe that adherence to Muslim religious morals and severe prison sentences imposed on individuals convicted of drug offenses effectively deter narcotics abuse. An affluent country, the UAE has established an extensive treatment and rehabilitation program for its citizens. There is a rehab center in Abu Dhabi, two in Dubai, and one each in Ajman and Sharjah for those identified as addicts. In accordance with federal law, UAE nationals who are addicted can present themselves to the police or a rehabilitation center and be exempted from criminal prosecution. Those nationals who do not turn themselves in to local authorities are referred to the legal system for prosecution. Third-country nationals or "guest workers" who make up approximately 80 percent of the population generally receive prison sentences upon conviction of narcotics offenses and are deported upon completing their sentences. Most UAE nationals arrested on drug charges are placed in one of the UAE's drug treatment programs. They undergo a two-year drug rehabilitation program, which includes family counseling/therapy.

#### **IV. U.S. Policy Initiatives and Programs**

**Bilateral Cooperation.** The DEA Administrator visited the UAE in July 2005 to enhance counternarcotics cooperation with the UAE. During her visit, she proposed, and the UAE accepted, establishing a DEA presence in the UAE to work closely with UAE authorities. The first DEA office was established in September 2005 in Dubai. DEA officials work with UAE authorities to combat both drug smuggling and drug related money laundering.

**The Road Ahead.** The U.S. and the UAE will continue to work together to discourage narcotics trafficking and to protect citizens from the scourge of drug abuse.

